

Sergeant Steers

June 17, 2015

NANCY ROELL

v.

HAMILTON COUNTY, OHIO/BOARD OF COMMISSIONERS, et al.

1:14-CV-637



513.233.3000

877.233.4403

Fax: 513.233.2310

depo@elitereportingagency.com

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF OHIO
WESTERN DIVISION

_____)	
NANCY ROELL)	
as executrix of the estate of)	
GARY L. ROELL, SR.,)	
)	
Plaintiff,)	
)	CASE NO.
vs.)	1:14-CV-637
)	
HAMILTON COUNTY, OHIO/BOARD OF)	
COMMISSIONERS, et al.)	
)	
Defendants.)	
_____)	

Deposition of: SERGEANT MIKAL STEERS

Pursuant to: Notice

Date and Time: Wednesday, June 17, 2015
11:12 a.m.

Place: Hamilton County
Prosecutor's Office
230 East Ninth Street
Suite 4000
Cincinnati, Ohio 45202

Reporter: Wendy Haehnle
Notary Public - State
of Ohio

1 APPEARANCES OF COUNSEL:

2

3 For the plaintiff:

4 Alphonse A. Gerhardstein, Esq.
5 and
6 Jacklyn Gonzales-Martin, Esq.
7 of
8 Gerhardstein & Branch Co., LPA
9 432 Walnut Street
Suite 400
Cincinnati, Ohio 45202
513.621.9100, Ext. 13
agerhardstein@gbfirm.com
jgmartin@gbfirm.com

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12

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20

21

22

23

24

25

1 APPEARANCES OF COUNSEL:

2

3 For the defendants:

4 Jerome A. Kunkel, Esq.
5 and
6 Pamela J. Sears, Esq.
7 of
8 Office of Hamilton County
9 Prosecuting Attorney
10 230 East Ninth Street
11 Suite 4000
12 Cincinnati, Ohio 45202
13 513.946.3082
14 pam.sears@hcpros.org
15 jerry.kunkel@hcpros.org

16

and

17

18 Linda L. Woeber, Esq.
19 of
20 Montgomery Rennie & Jonson, LPA
21 36 East Seventh Street
22 Suite 2100
23 Cincinnati, Ohio 45202
24 513.768.5239
25 lwoeber@mrjlaw.com

16

17 Also Present:

18 Andrea Neuwirth
19 Katie Cornelius
20 Nancy Roell

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1 I N D E X

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5 FURTHER EXAMINATION BY MS. MARTIN 130

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7 EXHIBITS MARKED REFERENCED

8 PLAINTIFF'S EXHIBIT 2 - 68

PLAINTIFF'S EXHIBIT 17 - 29

9 PLAINTIFF'S EXHIBIT 23 16 16

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10 PLAINTIFF'S EXHIBIT 25 54 54

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1 SERGEANT MIKAL STEERS

2 a witness herein, having been duly sworn, was
3 examined under oath as follows:

4 EXAMINATION

5 THE VIDEOGRAPHER: We are on the
6 record.

7 BY MS. MARTIN:

8 Q. Could you please state your full
9 name?

10 A. Mikal Steers.

11 Q. M-i-k-a-l?

12 A. M-i-k-a-l, yes.

13 Q. And I -- I'm Jaci Martin, one of the
14 attorneys who represents Mrs. Nancy Roell.

15 A. Okay.

16 Q. And I don't want to hear what you
17 talked about with your attorneys.

18 A. Okay.

19 Q. But could you tell me what you did to
20 prepare for today's deposition?

21 A. I looked at the after-action report
22 that I wrote about this incident. I also looked
23 at the filing that was made in regard to the
24 lawsuit and a CAD printout to try give me an idea
25 of time frames.

1 Q. You said a CAD printout?

2 A. Yes. It's from dispatch.

3 Q. You gave an interview with this -- as
4 part of the investigation of this incident,
5 right?

6 A. Yes.

7 Q. Did you review that?

8 A. Yes, I did.

9 Q. Did you review anything else?

10 A. No.

11 Q. Did you speak to Deputies Huddleston,
12 Alexander, and Dalid in preparation for today's
13 deposition?

14 A. No, not in preparation. I talked to
15 them to see when they were going to do their
16 depositions and asked them how they were doing,
17 and that's it.

18 Q. Did you have the opportunity to read
19 the transcripts from their depositions?

20 A. No.

21 Q. Did you ask them what they talked about
22 in their depositions?

23 A. No, no.

24 Q. What is your highest level of
25 education?

1 A. High school.

2 Q. Where did you go?

3 A. Roger Bacon.

4 Q. When did you graduate?

5 A. '92.

6 Q. Did you have any law enforcement jobs
7 prior to working for the Hamilton County
8 Sheriff's Office?

9 A. No. I started at the sheriff's office
10 as a corrections officer.

11 Q. And that was in 1995?

12 A. That was in 1995, yes.

13 Q. Did you go to OPOTA training before
14 that?

15 A. I went to the sheriff's department's
16 corrections academy. And while I was a
17 corrections officer I went to the OPOTA Police
18 Academy. The sheriff's department put it on.

19 Q. And that sheriff's office training, was
20 that patrol training?

21 A. Well, you start off as a certified
22 corrections officer.

23 And while you're a corrections officer,
24 if you want to become a certified peace officer,
25 you have to go to the peace officer academy.

1 And so I went to the peace officer
2 academy while I was a corrections officer and was
3 certified as a peace officer.

4 And then I was promoted to a patrol
5 officer, I think, in '97 or '98.

6 Q. For a while you were a patrol clerk,
7 correct?

8 A. Yes. When you first come to the patrol
9 division you start of as a patrol clerk. Then
10 you become a patrol officer.

11 Q. What's the difference between a clerk
12 and a patrol officer?

13 A. A patrol clerk's duties are clerical
14 and administrative in nature for the most part.

15 You'll do prisoner transportation and
16 booking at the -- at the jail. And there's a
17 24-hour holding facility at headquarters. You
18 know, and they'll do booking there.

19 But for the most part, it's
20 transportation and clerical work, answering
21 phones, things like that.

22 Q. In 2001 you were promoted to
23 corporal?

24 A. That sounds right.

25 Q. Is that your current position?

1 A. No. I'm a sergeant now.

2 Q. When were you promoted to sergeant?

3 A. August 19th, I think, of 2013.

4 Q. That was just after the incident --

5 A. Yes.

6 Q. -- with Mr. Roell?

7 A. Yes, it was.

8 Q. On the night of the incident involving
9 Mr. Roell, you were a corporal?

10 A. That's correct.

11 Q. What was your beat that night?

12 A. 9 Sam 33.

13 Q. What does that mean?

14 A. Sycamore is broken up into three
15 different beats.

16 The 9 Sam 31 beat is primarily the
17 southern car. The 9 Sam 32 beat is primarily the
18 northern car. And the 9 Sam 33 beat, usually
19 occupied by a corporal, is a cover car, usually
20 working in the south, but occasionally will cover
21 in the north, as well.

22 Q. Corporal Gilliland was also working
23 that night, right?

24 A. Yes, he was.

25 Q. Where was his beat?

1 A. I think Jeff was 9 Edward 32 that
2 night. I'd have to look to see. But I think he
3 was 9 Edward 32, which is a northern county-wide
4 beat.

5 Q. Were you supervising Deputies
6 Huddleston, Alexander, and Dalid on
7 August 13th, 2013?

8 A. Yes.

9 Q. What were you doing before the
10 encounter with Mr. Roell?

11 A. I was at our Kenwood Road substation
12 finishing up a crash report.

13 Q. What was the first thing you heard
14 about the incident with Mr. Roell?

15 A. The dispatch came out for a trouble
16 run. The subject was known to the complainant,
17 because they provided a name.

18 The name ended up not matching. But
19 they provided a name, so we knew the subject was
20 known, and that it was breaking windows and
21 trying to get into the house.

22 Q. What else did you hear?

23 A. The initial dispatch was for me and for
24 Deputy Alexander to be dispatched, because he was
25 9 Sam 32.

1 I was given a disregard because there
2 was a unit closer, and that was
3 Deputy Huddleston.

4 Q. Who told you to disregard?

5 A. It was Deputy Huddleston that said he
6 was right there with them and I could disregard.

7 A short while later one of the deputies
8 got on the air and asked for more cars. I told
9 dispatch to drop attendance for assistance.

10 And I was -- I was heading north at
11 that time with a code 3 response to get up to
12 that location.

13 Do you want me to keep going or --

14 Q. Just a minute.

15 A. Okay.

16 Q. Sure. Go on.

17 A. As I was responding code 3 out to the
18 location, one of the deputies had advised that
19 you can slow everybody down.

20 So I stopped my code 3 response, but I
21 still responded. You know, it was late enough I
22 could get there pretty quick. And I slowed my
23 code 3 response, but I still got there pretty
24 quickly.

25 I heard them call for a squad. And

1 then I heard them call for a squad a second time.

2 And a short time after that is when I
3 pulled up to the scene.

4 Q. Which radio frequency were you on?

5 A. Hamilton County East.

6 Q. Is that the same frequency as
7 Deputy Alexander?

8 A. Deputy Alexander would have been on
9 that frequency, yes.

10 Q. What about Deputy Huddleston?

11 A. Deputy Huddleston would have been on
12 northeast communications and then would have
13 switched over as soon as responding to the
14 Sycamore Township detail.

15 So he would have started on northeast
16 communications but then switched over.

17 Q. Does that mean putting down one
18 radio --

19 A. No, it's --

20 Q. -- and picking up another radio?

21 A. It's switching from channel 3 to
22 channel 1 on your radio.

23 Q. So did you only have one radio or two?

24 A. I probably had two radios. I usually
25 carry two radios so that I can simultaneously

1 listen to both channels.

2 Q. So you heard that a known subject, a
3 neighbor, was breaking windows?

4 A. I don't know if they said a neighbor.
5 It was a known subject.

6 We had a name, so we knew it was a
7 known subject.

8 Q. So Huddleston told you to disregard, so
9 you continued writing your report at the Kenwood
10 substation?

11 A. No. I was already in my car and had
12 pulled out when I got the disregard. So I was on
13 Kenwood Road when they called for help, right in
14 front of the substation, but I hadn't gone back
15 into the substation.

16 Q. And when you got the call for help, was
17 that from Deputy Alexander?

18 A. I don't remember.

19 Q. And you said you went code 3.

20 What does that mean?

21 A. Code 3 means lights and sirens.

22 Q. And what was the route you took?

23 A. I took Kenwood north to Cross County to
24 I71 to 275 to the Montgomery Road exit, which
25 brings you out right there at Montgomery and

1 Hetz.

2 Q. Where were you on that route when you
3 heard the dispatch about slowing down?

4 A. Probably on -- I don't know exactly.

5 I was close so -- I don't know exactly
6 where I was.

7 Q. How long was it from the time you heard
8 you can slow down to when you pulled into
9 Barrington Court?

10 A. I don't know exactly, couple minutes.
11 I don't know.

12 Q. Where were you on your route when you
13 heard the call -- the first call for the squad?

14 A. I don't know.

15 Q. Where you were when you heard the
16 second call for a squad?

17 A. I don't know.

18 Q. How much time elapsed between the first
19 and second call for the squad?

20 A. I don't know.

21 There is a -- I mean, there's a record
22 you could check into that would show. I just --
23 I don't know just pulling it out of my head what
24 time it was.

25 Q. What is the address of the Kenwood

1 substation?

2 A. 8540 Kenwood Road.

3 Q. What did you observe as you entered
4 Barrington Court?

5 A. When I pulled onto Barrington Court, I
6 pulled into the back where the cruisers were.
7 And that's where the call was, too; got out of
8 the car, and there was somebody standing in front
9 of the residence.

10 I said, where are they, referring to
11 the officers. They directed me around back.

12 So I ran around back and walked into
13 the patio area. And that's where I saw Mr. Roell
14 and the officers.

15 Q. Who was in front of the residence?

16 A. I think it was a woman. I don't
17 know.

18 Q. Those -- when you heard the deputy's
19 call for a squad, what did they say?

20 A. Dispatch a squad.

21 Q. And the second call for a squad sounded
22 more urgent, right?

23 A. I don't know if it sounded more urgent.
24 But it's unusual to have that asked twice. And
25 that's why I was concerned that something was

1 wrong.

2 Q. You were still en route when you heard
3 that second call --

4 A. The second one, yeah.

5 Q. -- in your car?

6 A. In my car.

7 Q. And the deputy sounded worked up in the
8 second call, right?

9 A. No. I -- I don't recall him sounding
10 worked up.

11 It's just unusual for me to hear a
12 second request for a squad.

13 (Plaintiff's Exhibit 23 was marked for
14 identification.)

15 BY MS. MARTIN:

16 Q. Handing you what's been marked
17 Plaintiff's Exhibit 23.

18 A. Okay.

19 Q. This is a transcription of the
20 interview you gave on the date of the incident.

21 A. Okay.

22 Q. And you said you had an opportunity to
23 review this before your deposition, correct?

24 A. Uh-huh.

25 Q. Was that a yes?

1 A. Yes. I'm sorry. Yeah.

2 Q. If you turn to page 14, and you can
3 look at the bottom of page 13 if you need for
4 context. But --

5 A. Oh, I see. Page 14 you said?

6 Q. Yeah. At the very top of page 14 it's
7 written, So he seemed a little worked up.

8 A. Okay.

9 Q. Take a minute to look at it.

10 But did I read that correctly?

11 A. Yes, you did.

12 Q. Does that refresh your recollection as
13 to whether the deputy seemed worked up when he
14 called for the squad?

15 A. Yes.

16 Q. So you were telling me about being
17 directed by someone in front of the house to go
18 around back?

19 A. Uh-huh.

20 Q. What did you observe when you got
21 around back?

22 A. When I got around back, Mr. Roell was
23 on the ground, face-down, had his hands
24 underneath him.

25 Deputy Dalid was up by his head with

1 his hand on his shoulder.

2 I asked, who's hurt. That was the
3 first thing I asked when I got back there,
4 because there had been two calls for a squad.

5 And Deputy -- I think it was
6 Deputy Huddleston said that he had a small cut,
7 that Deputy Alexander had been punched, and that
8 Mr. Roell had been tased.

9 Q. What happened next?

10 A. I told them to roll Mr. Roell over,
11 bring him into a recovery position.

12 When they did that, I noticed that he
13 didn't look good; went and checked for a pulse
14 and found none. And I began CPR.

15 I told Deputy Alexander to advise the
16 squad that was already en route -- advise them
17 that CPR was already in progress.

18 Q. What happened next?

19 A. I told Deputy Dalid to go around to the
20 front of the house to direct the squad to the
21 back so that they knew where to go.

22 And I continued compressions until the
23 life squad got there. There was a couple times
24 that I thought I had a faint pulse. And then it
25 faded and I began again.

1 I continued compressions until Sycamore
2 Township EMS showed up.

3 They hooked up a monitor and then they
4 took over the compressions at that point and
5 transported him to Bethesda North.

6 Q. When you first arrived at the patio
7 area --

8 A. Uh-huh.

9 Q. -- and observed Mr. Roell, did you
10 observe that he was naked from the waist down?

11 A. Yes.

12 Q. And who, other than Mr. Roell, was
13 there when you arrived?

14 A. Deputy Sewall, Deputy Huddleston,
15 Deputy Alexander, Deputy Dalid. Those were the
16 only ones that I saw.

17 Q. And Mr. Roell was completely
18 motionless?

19 A. He was.

20 Q. And you said you learned that
21 Deputy Alexander had been punched, right?

22 A. Uh-huh.

23 Q. But there was no visible injury?

24 A. Not that I noticed, no.

25 Q. And you observed that Gary Roell was

1 handcuffed and shackled?

2 A. Yes.

3 Q. Now, Deputy Sewall said in his
4 interview that he heard you say, this looks like
5 excited delirium.

6 Do you recall that?

7 A. Yes. I think I said something to that
8 effect.

9 Q. You knew to roll Mr. Roell over and sit
10 him up, right?

11 A. I did.

12 Q. And you were following the Hamilton
13 County Sheriff's Office policy about cuffing?

14 A. Well, I just wanted to get a look at
15 him and get him in a recovery position.

16 Q. Are you familiar with the Hamilton
17 County Sheriff's Office policy on cuffing?

18 A. Yeah.

19 Q. And it says to sit a person up after
20 they're cuffed?

21 A. Yeah. Well --

22 MS. SEARS: Objection as to form of
23 what it says after they're cuffed.

24 You can answer.

25 THE WITNESS: Okay. Sorry.

1 A. Once -- once they're under control, you
2 can put them in a recovery position.

3 When -- sometimes, when you're still
4 struggling with someone -- obviously, if you're
5 still struggling, you can't get them into a
6 recovery position.

7 So once the subject is handcuffed and
8 controlled, you put them in the recovery
9 position.

10 BY MS. MARTIN:

11 Q. What is a recovery position?

12 A. You can recover -- the concern when
13 putting someone into what we call a recovery
14 position is to avoid any type of positional
15 asphyxiation.

16 So you want to make sure that they're
17 able to expand their diaphragm. You don't want
18 them spending extended periods of time flat on
19 their back or flat on their stomach.

20 What we like to do is get someone, roll
21 them to their side, then get their legs
22 underneath them and either sit them up or stand
23 them up.

24 Q. If you don't mind, I'm going to ask you
25 to stand up then lay down and show us the

1 position that you observed --

2 A. Okay.

3 Q. -- Mr. Roell in.

4 A. Where am I going for this? Do I have
5 to be on camera or --

6 Q. Yeah.

7 MS. SEARS: I don't know where -- this
8 chair is --

9 THE WITNESS: Let me take my coat
10 off.

11 MS. SEARS: This time Ms. Martin is
12 going to pay for your dry-cleaning.

13 THE WITNESS: What's that?

14 MS. SEARS: I'm just -- no.

15 A. This is the best representation I
16 can -- I can make.

17 BY MS. MARTIN:

18 Q. Okay. So you're laying flat on the
19 ground --

20 A. Uh-huh.

21 Q. -- face down, head straight, and your
22 hips are flat on the floor --

23 A. Yes.

24 Q. -- and your legs are out straight
25 behind you, and your arms are on -- are bent and

1 at your chest?

2 A. Yes.

3 Q. Where was Deputy Huddleston at this
4 point?

5 A. He was -- can I stand up now?

6 Q. Sure. Thank you.

7 A. Thanks.

8 Deputy Huddleston was -- would have
9 been standing behind him at his feet, behind
10 him.

11 Q. Okay. So --

12 A. I'm sorry.

13 Q. Pretend you're still laying on the
14 ground and put yourself where Deputy Huddleston
15 was.

16 A. Actually, I'm not -- I'm not
17 100 percent sure where Deputy Huddleston was.

18 I know where Deputy Dalid was.

19 Q. Where was Deputy Dalid?

20 A. Deputy Dalid was at his -- at his head
21 with his hand on his shoulder.

22 Q. Which shoulder?

23 A. That would have been the shoulder --
24 the left shoulder.

25 The exact position of everybody else,

1 right now, I can't tell you.

2 I know they were there, but it all --
3 it happened very quickly, where we rolled him
4 over and CPR began.

5 Q. Were the other deputies helping to
6 control Mr. Roell?

7 A. Well, they -- they rolled him over when
8 I told them to.

9 Q. And you said that Deputy Dalid was
10 controlling Mr. Roell --

11 A. Right.

12 Q. -- on his shoulder?

13 A. There was a deputy -- I'm not sure
14 which one -- had ahold of his feet. And I
15 believe there was another deputy on the other
16 side of his -- on the other side of his body.
17 But I couldn't tell you who it was or exactly how
18 they were.

19 Q. In the initial dispatch about the
20 incident, did you hear that the suspect was
21 acting crazy?

22 A. I -- I don't remember that.

23 If I listened to the dispatch, I could
24 tell you. But I don't remember that.

25 Q. How much pressure was being exerted by

1 Deputy Dalid?

2 A. It didn't appear to be much. It
3 appeared to be -- just sort of have -- have your
4 hand on there to make sure you're not raising up.

5 Q. Did you see Mr. Roell push up?

6 A. No.

7 Q. Did you hear Mr. Roell say anything?

8 A. No.

9 Q. Did you see Mr. Roell kick?

10 A. Nope.

11 Q. How long did you observe Mr. Roell
12 before he was turned over?

13 A. I couldn't tell you exactly. It was a
14 very short amount of time, because I don't like
15 to see anyone face-down for any long period of
16 time.

17 So as soon as I saw things were under
18 control, we turned him over.

19 Q. Why don't you like to see anybody
20 face-down for a long period of time?

21 A. For positional reasons. We don't want
22 to run the risk of someone having trouble
23 breathing.

24 Also, you can't evaluate injuries if
25 you can't see someone. So --

1 Q. So as you started to get Mr. Roell up,
2 you realized he wasn't breathing?

3 A. When we rolled him over, I noticed that
4 he didn't look good.

5 And I, right away, went down and
6 checked for a pulse and didn't find one, and also
7 noticed he wasn't breathing.

8 Q. What do you mean he didn't look good?

9 A. He didn't -- he didn't -- his face
10 didn't look good. He didn't appear to be
11 breathing. He didn't appear to be moving air.

12 Q. And he had a gray appearance?

13 A. He -- yeah. He kind of looked ashen.

14 Q. No pupil response?

15 A. At one point during CPR, I asked one of
16 the deputies to -- to shine the light on his
17 pupils, and there was no response.

18 Q. You also noticed that he was drenched
19 with either water or sweat?

20 A. Right.

21 Q. Approximately how long did you conduct
22 CPR?

23 A. I don't know, until the life squad got
24 there.

25 I began shortly after arriving, and I

1 kept going until the life squad got there.

2 Q. And you felt Mr. Roell's pulse come
3 back twice?

4 A. I thought I did, yeah. I stopped twice
5 and checked for a pulse. One time I felt like I
6 had a pretty good pulse, and then it faded.

7 I stopped another time and checked for
8 a pulse, and I thought it was -- had a weak
9 pulse, and then that faded.

10 And then I didn't check again until the
11 life squad got there. I just continued
12 compressions until the life squad got there.

13 Q. What were the other officers doing
14 while you were conducting compressions?

15 A. I had sent Officer Dalid out front to
16 direct the squad.

17 At one point, Deputy -- Deputy
18 Sewall -- one of the times that I stopped to
19 check for a pulse, he did a mouth sweep to make
20 sure that he wasn't choking on anything. And he
21 wasn't.

22 And the other officers were just
23 standing there, just waiting for the squad to get
24 there.

25 Q. You also ordered Deputy Dalid to start

<http://www.yeslaw.net/help>

1 getting crime scene tape up?

2 A. Yes. I don't know if I did that prior
3 to the squad getting there, or if I told him to
4 start doing that all at the same time. I'm not
5 sure.

6 Q. You realized that the CPR wasn't
7 working, and you told Deputy Sewall to start a
8 homicide log?

9 A. Right. Well, what I realized was it
10 was a -- a use of -- there was going to be a use
11 of force that resulted in, in the very least,
12 serious -- someone stopped breathing, someone's
13 heart had stopped.

14 In those instances, we treat the -- the
15 area as a crime scene until our criminal
16 investigation section has had a chance to come
17 out and conduct their investigation.

18 So we sealed that entire area as a
19 crime scene.

20 Q. Did Deputy Sewall start the homicide
21 log?

22 A. After he did a protective sweep of
23 Mr. Roell's residence he began a log.

24 Q. Did he start that protective sweep of
25 Mr. Roell's residence while you were still

1 conducting CPR?

2 A. No. That was while the squad was
3 rolling away.

4 Q. After EMS showed up, you said they
5 hooked him up to a machine?

6 A. Uh-huh.

7 Q. And they told you that Mr. Roell didn't
8 have a heartbeat?

9 A. Right. They said that he had asystole,
10 which, apparently, means that shocking wouldn't
11 work. So they didn't order an electric shock.

12 Q. And at that point, EMS took over
13 compressions?

14 A. That's right.

15 I continued for a short time while they
16 were checking everything out. But shortly after,
17 they took completely over.

18 Q. I'll have you turn to
19 Plaintiff's Exhibit 17, please. It's in this
20 white book.

21 A. Oh, okay.

22 Q. Do you recognize this exhibit?

23 A. Yes. It's a CAD printout.

24 Q. Is this the CAD printout that you
25 reviewed for today's deposition?

1 A. Yes.

2 Q. Could you identify for me where you
3 first appear (inaudible)?

4 MR. KUNKEL: Bless you.

5 A. Let's see. It looks to be the first
6 time that I'm on here is on the initial dispatch,
7 at 02:48.

8 BY MS. MARTIN:

9 Q. Are you referring to the entry where it
10 says, Stat, HL/9S33?

11 A. The first time I see myself is right
12 here.

13 Q. Higher?

14 A. Oh, yeah. Okay. It's the 02:48 entry,
15 yeah. I see it.

16 Q. I'm just trying to see where you are.

17 A. Okay. Right there, 02:48, 9 Sam 33,
18 and then just below that is the first time you'll
19 see my name, Officer 1.

20 Q. Okay. And in that first entry it says,
21 Stat, HL.

22 What's that mean?

23 A. I don't know.

24 Q. And then it says, ER.

25 Does that mean en route?

1 A. Yes.

2 Q. Then at 02:49 it says, Stat, HL, and
3 then it has your -- is that a unit number, car
4 number? What do you call that?

5 A. Yeah. It's -- 9 Sam 33 is the unit
6 number.

7 And the next indication there is AV.
8 That means available. That's when they were
9 letting me know to disregard.

10 Q. The instruction to you to disregard
11 doesn't appear on this incident recall, right?

12 A. It doesn't appear to, no.

13 But it does let me know they're
14 available.

15 Q. Okay. And the next time I see your
16 name is at 2:54 --

17 A. Uh-huh.

18 Q. -- is that right?

19 A. Something that might help you clear
20 that up, though, if we want to move back for just
21 a second so -- on the instruction to disregard.

22 Right after it shows me as AV --

23 Q. Uh-huh.

24 A. -- if you look at the 02:50 entry, it
25 says 9P32 en route.

1 Q. Uh-huh.

2 A. That is 9 Paul 32. That means that
3 they switched to the eastern frequency and let
4 them know that they were en route to that
5 dispatch.

6 So they put me available. Then they
7 put 9 Paul 32 at the scene.

8 Q. Okay. So 9P32, en route, means
9 Huddleston is en route?

10 A. They actually have him 27, which means
11 he's there.

12 So he may have said, I'm close, I'm
13 going with him, and they just went ahead and put
14 him on scene.

15 Oh, wait. I'm sorry. They do have him
16 en route. And then after that -- yes. That
17 means Huddleston.

18 Q. Okay. When you say they switched to
19 the eastern frequency, who is they?

20 A. He, 9 Paul 32, switched; Huddleston.

21 Q. And are you on the eastern frequency?

22 A. Yes.

23 Q. So Huddleston switched to the frequency
24 that you were on?

25 A. Right; the frequency that primary

1 dispatch is using. He switched to that to let
2 them know that he was the one that was going to
3 that detail, because he was close.

4 Q. And then at 2:54 you're en route
5 again?

6 A. Yep.

7 Q. So that would be after one of the
8 deputies requested more cars?

9 A. Yes. That would be after they
10 requested cars and I told them to drop tone for
11 assistance.

12 Q. And is the request for more cars on the
13 incident recall?

14 A. I don't see it. And I don't see
15 the all-county broadcast, either.

16 Q. The all-county broadcast is where --
17 what you said dropping tones?

18 A. Uh-huh.

19 Q. Would that normally be on an incident
20 recall?

21 A. Normally, yeah.

22 Q. So you're --

23 A. It looks like they've got one down at
24 2:56. But it's below all that other stuff.

25 Q. Where it says, ACB and --

1 A. Uh-huh.

2 Q. -- BC?

3 So that means all-county broadcast.

4 And what's the BC mean?

5 A. Broadcast on the east.

6 Q. But you believe that you were told
7 before 2:54 that more units were needed, and
8 that's why you're en route at 2:54?

9 A. No. I would have been told right at
10 2:54 that they needed more cars. And I was
11 en route and -- during the all-county
12 broadcast.

13 Q. So then what time did you arrive on
14 scene?

15 A. Well, according to -- I couldn't tell
16 you exactly when I arrived on scene.

17 I can tell you when the CAD puts me on
18 scene if you give me a minute.

19 Q. Sure.

20 A. It appears that the CAD has me 27 at
21 3:00.

22 Q. Where were you when you told dispatch
23 that you were on scene?

24 A. I -- I don't know. I -- I could have
25 hit my button. I could done it over the air. I

1 could have done it when I was driving up to the
2 scene. I don't know.

3 Oftentimes, I'll put myself on scene as
4 I'm approaching the location that I'm headed to,
5 so that if something were to happen when you get
6 there, someone knows where you are.

7 So that's what I would do oftentimes.
8 I don't know if I did that in this case.

9 Q. And what is the process for making CAD
10 entries?

11 For instance, if you're -- like you
12 just said, you're pulling up on a scene and --
13 and you push the button, tell the radio -- tell
14 the dispatch, I'm on scene.

15 Does then -- does dispatch then put in
16 the CAD entry?

17 A. Right. Dispatch then puts it in.

18 If you hit the on scene button on your
19 computer, if -- if it works properly, then
20 dispatch will put you on scene.

21 Or if you come over air and say that
22 I'm 27, on scene, or -- then dispatch will put
23 that as a CAD entry.

24 Q. On the time that you pushed the button
25 or came on air --

1 A. Right.

2 Q. -- they'll put an entry for that time
3 you're on scene?

4 A. Right.

5 Q. Did you push the button on your
6 computer in this instance, or say --

7 A. I don't know.

8 Q. So if you do push the button, you're
9 talking about on your MDT? Is that what you're
10 talking about?

11 A. It's the MDC. It's a touch-screen
12 computer. And there's a button that says on
13 scene that you can hit that. Or you can say, I'm
14 27, over the air.

15 Q. Does that require -- if you push that
16 button on your MDC, does that require any typing
17 for the person doing the CAD entry?

18 A. Oh, I don't know. I don't know what
19 dispatch does on their end. I just know what we
20 do on our end.

21 Q. And what time did EMS arrive on
22 scene?

23 A. I don't know what time they arrived. I
24 can look on here and see what time the CAD has
25 them. I think that might be on here.

1 Sometimes that's on a separate CAD
2 report. It might be on the fire CAD.

3 Medic 93 at 3:07 is what it looks like.

4 But that is on police dispatch. So
5 fire dispatch may have a different time.

6 They're two different channels. Fire
7 dispatch dispatches fire and manages all the fire
8 runs. And then once the fire department does
9 something, they would -- they can put it onto our
10 report.

11 So I don't know if these times are
12 factual or not. I don't know if they're
13 representative or not of exactly when they got
14 there.

15 Q. Just point to me -- I can't see where
16 you're pointing about medic.

17 A. Right here at -- 03:07 would be the
18 time.

19 Q. The first 03:07 entry?

20 A. Yeah. It says, first unit arrived,
21 M93. That's medic 93.

22 Q. Thank you.

23 A. Okay.

24 Q. Do officers report that EMS is on
25 scene?

1 A. No. The EMS makes a report to fire
2 dispatch when they get on scene. And then --
3 which is all done through Hamilton County
4 Communication Center, it's just different desks.

5 Police and fire dispatch differently.

6 Q. So EMS tells the fire dispatch --

7 A. Uh-huh.

8 Q. -- and then the fire dispatch
9 communicates --

10 A. I don't know how they get that
11 information onto the -- onto our CAD. I just
12 know it ends up there.

13 Q. At 3:04, the first entry of the 3:04 --

14 A. Uh-huh.

15 Q. -- it says, CPR in progress per 9S32.

16 A. Uh-huh.

17 Q. Is 9S32 Deputy Alexander?

18 A. Yes.

19 Q. And do you think this is when -- you
20 told me about earlier, that you were doing CPR
21 and told Deputy Alexander to let the squad
22 know?

23 A. Right. That was when they made the
24 notation that -- he got on the air and advised
25 that CPR was progress.

1 Q. At what point after you started the CPR
2 did you -- did Alexander make that --

3 A. Very shortly after began CPR I looked
4 up and told him to notify dispatch that CPR was
5 in progress.

6 Q. So after Mr. Roell was taken away by
7 EMS, what happened next?

8 A. After he was taken away by EMS, I
9 notified the night watch commander, who was
10 Lieutenant Gramke, that we had a serious use of
11 force that may result in death.

12 I secured the crime scene there, had
13 them put up crime scene tape.

14 And I remained with Deputies Alexander,
15 Dalid, and Huddleston to ensure the integrity of
16 the interviews that would be coming. We didn't
17 want anyone collaborating.

18 So, normally, what we'll do is, we'll
19 physically separate individuals involved in a
20 serious use of force.

21 Until I had more people there, I wasn't
22 able to physically separate them. So I prevented
23 them from discussing the incident by keeping them
24 with me.

25 I explained to them exactly what was

1 going to be happening.

2 Prior to that, I had sent
3 Deputy Gilliland to the hospital to be with
4 Mr. Roell, to keep me updated on his status.

5 And then I explained to those three
6 officers what was going to be happening, that
7 there was going to be an investigation. CIS and
8 Internal Affairs were going to come out and
9 conduct their investigation.

10 As soon as Sergeant Crock got on scene,
11 I was able to physically separate the officers by
12 putting them in separate patrol cars.

13 I did tell each of the guys, call home,
14 make sure that your family knows that you're okay
15 and you're -- it's going to be a long night.

16 And I told them not to make any other
17 calls besides that.

18 Q. How long after you stopped compressions
19 did you tell Deputies Huddleston, Alexander, and
20 Dalid to not talk about the incident?

21 A. I don't know.

22 Once Mr. Roell was gone and we had the
23 scene locked down, is when I had the chance to
24 calm them down. Because they were -- they were
25 very shaken up by the whole incident.

1 So I had a chance to calm the officers
2 down and then begin explaining the process to
3 them.

4 I couldn't tell you exactly how long it
5 was. Because it took a few minutes to get
6 everything under control.

7 Q. What do you mean by, after the scene
8 was locked down?

9 A. With the crime scene tape up, Mr. Roell
10 is transported to the hospital, I've got Deputy
11 Gilliland going to the hospital with him, I've
12 got tape up, and the scene's secure.

13 Q. Someone had gone through the Roell
14 residence to do a sweep of that?

15 A. Yes. Deputy Sewall and
16 Officer Alderman from Montgomery. Because there
17 was other agencies that were responding to the
18 officer-needs-assistance call.

19 Excuse me.

20 So Deputy Alderman from Montgomery was
21 with Deputy Sewall, and went in and cleared the
22 house to make sure there wasn't anybody injured
23 inside.

24 Q. Was that part of what you referred to
25 as getting the scene locked down?

1 A. That's -- well, it's all part of the --
2 the whole picture. It was part of it, yeah.

3 Q. Did you check in with the
4 complainant?

5 A. I did not. I don't remember who -- one
6 of the other officers was in talking with the
7 complainant.

8 I stayed back with the officers that
9 were involved in the use of force.

10 I -- I never did speak with the
11 homeowners that called us.

12 Q. What was it that you observed on scene
13 after you arrived that caused you to say that
14 this looks like it could be excited delirium?

15 A. Well, there's three healthy deputies
16 that had to fight to control this guy.

17 He'd been tased a couple times.
18 Apparently, the first one didn't take effect.

19 He was naked and soaked with water.

20 So those were all the things that came
21 into the equation, why I was thinking this could
22 be an instance like that.

23 Q. Those are all symptoms of excited
24 delirium?

25 A. They can be, yeah; none individually, I

1 mean, anything by itself.

2 But taken as a whole, it's -- it's
3 something to be concerned about.

4 Q. At any point before Sergeant Crock came
5 on the scene, did Deputies Huddleston, Alexander,
6 and/or Dalid tell you what happened?

7 A. Briefly. They gave me a brief rundown
8 of what had happened.

9 I told them I didn't want -- I didn't
10 want them to go into full detail, but, you know,
11 a brief rundown of what happened.

12 And it was -- it's almost impossible to
13 have someone tell you a brief rundown of what
14 happened at that point, when the emotions are
15 running that high.

16 So I did get a brief rundown of the
17 encounter.

18 And right away, when I got there, they
19 told me that he had been tased. So --

20 Q. Where were you when you got this brief
21 rundown?

22 A. Behind the fence of the victim's
23 residence there.

24 Mr. Roell's residence was over here.
25 Our victim called us to 10 -- I think it was

1 29 -- okay -- behind their fence, in the grassy
2 area back there.

3 Q. Outside the patio?

4 A. Right.

5 Q. And what did they tell you?

6 A. Just they had had one hell of a fight
7 with him and that the Taser didn't seem to work
8 and they couldn't even get him handcuffed behind
9 his back and they finally got him handcuffed and
10 they can't believe that he stopped breathing.

11 That's -- they were just shocked.

12 When we rolled him over and he wasn't
13 breathing, they were shocked.

14 THE WITNESS: Thank you.

15 BY MS. MARTIN:

16 Q. Did they tell you anything else?

17 A. Not that I can remember.

18 Q. Did they say where on Mr. Roell's body
19 he was tased?

20 A. I don't know. I don't know if they
21 said that or not. I don't think so, but I -- I
22 don't know if they mentioned that.

23 Q. Did they say why they fought with
24 Mr. Roell?

25 A. They told me that Mr. Roell attacked

1 them and swung a potted plant at them and
2 punched Deputy Alexander.

3 Q. Did you see the Taser prongs?

4 A. I saw spent Taser wire. I don't
5 remember seeing Taser prongs.

6 Q. While you were waiting for more
7 officers so that you could separate the three
8 deputies, what all did you do and say?

9 A. I tried to calm them down and then
10 explain to them the process.

11 The process is there is going to be a
12 criminal investigation. There's going to be an
13 internal investigation.

14 And that's it.

15 Q. When Sergeant Crock showed up, he took
16 Deputy Huddleston into his cruiser?

17 A. I don't remember who ended up in which
18 cruisers. But we separated the three officers by
19 putting them in cruisers.

20 Q. And I think that you said in your
21 interview that you had Deputy Alexander with
22 you?

23 A. Okay.

24 Q. Do you recall that?

25 A. Well, he would have been in my cruiser

1 then.

2 Q. Were you in the cruiser with him?

3 A. No. If -- if in the interview I said
4 that I had him, I meant that he had been put into
5 my cruiser.

6 Q. Deputy Dalid went into his own cruiser.

7 A. Okay.

8 Q. Why couldn't you just put them all in
9 their own cruisers?

10 A. We wanted them all in the same area.
11 But we wanted them all isolated so they weren't
12 speaking to each other.

13 Cruisers were all over the place. So
14 we had cruisers right there; put them right here,
15 we can keep an eye on the guys. And if they were
16 having trouble, we know that. Let's keep them
17 isolated.

18 So it worked out really well to have
19 the three cars right there next to each other.
20 You can see the three guys in there and we can
21 ensure that they're isolated but still being
22 watched.

23 Q. When you were calming them down and
24 getting a short rundown of what happened, was it
25 the four of you standing outside the fence

1 together?

2 A. I think it was just the four of us.

3 Because I think Matt was -- no, Matt would have
4 been closer up to the front of the house.

5 I think he may have been -- Matt may
6 have been back there, also. But I recall the
7 four of us standing back there.

8 Q. Are you referring to Matt Sewall?

9 A. Yes.

10 Q. One of the deputies told you that when
11 they arrived, Deputy Alexander opened the gate
12 and said, hey, show me your hands, to Mr. Roell,
13 right?

14 A. I'm not sure. Is that my statement?

15 Q. Page 37.

16 A. Okay.

17 Q. I'm looking at lines 2 through 4.

18 A. Yeah, they did.

19 They explained to me the power display
20 of the Taser, that didn't have any effect on him.

21 And a power display -- what they do
22 is -- a lot of times someone who's -- anyone
23 familiar with the Taser, they see a power
24 display, sometimes they'll stop, they'll stop
25 fighting right there.

1 That didn't -- that didn't work. They
2 didn't get any compliance with that.

3 They tried to go hands-on. So they put
4 the Taser away and tried to go hands-on, tried to
5 get him handcuffed.

6 And that's -- that's when he punched
7 Deputy Alexander. And that's when
8 Deputy Huddleston drew his Taser again and
9 identified the Taser.

10 Q. So the deputies didn't tell you
11 anything about Gary Roell running at them,
12 correct?

13 A. They said he advanced on them, I
14 believe is what they told me. Let me see.

15 No. They didn't say anything about him
16 running at them, no.

17 MS. SEARS: On that particular page?

18 THE WITNESS: On this particular page,
19 yeah.

20 A. I mean, I -- I do recall hearing that
21 he had advanced on them. But I don't see it on
22 this page.

23 BY MS. MARTIN:

24 Q. But, in fact, after they arced the
25 Taser, Mr. Roell took a step back.

1 A. Well, yeah. And these are the things
2 that they told me back there.

3 I don't know if these are the things
4 that I ultimately recall properly or not.

5 These are the things they gave me in a
6 brief rundown when I was trying to get them not
7 to tell me too much.

8 Q. Are you aware the -- are you aware of
9 the Hamilton County Sheriff's Office policy that
10 requires for an investigation, that deputies
11 involved in a use of force fill out a written
12 narrative after the incident?

13 A. No. That's -- it's actually not always
14 the process.

15 Oftentimes, we do recorded interviews.
16 And the investigating supervisor will take that
17 recorded interview and -- and put it into
18 writing.

19 You can -- you can be required to do a
20 written statement at any time. But often on our
21 use-of-force investigations, the supervisors, we
22 do the interview with the officers and with the
23 people involved with the use of force and record
24 it and digitally save it.

25 Then we just trans -- it's not an exact

1 transcription all the time. But you've got that
2 file saved. And you summarize the statements in
3 a -- in your use-of-force report.

4 Q. So is that the process you used in this
5 instance?

6 A. Well, I didn't do the use-of-force
7 investigation in this instance because of the
8 serious nature of it.

9 Q. You said in your interview that you
10 hadn't dealt with Mr. Roell before?

11 A. Uh-huh.

12 Q. But do you know now that you did write
13 an incident report whenever he was a missing
14 person in 2009?

15 A. No. I didn't know that. You're the
16 first -- you're the first to tell me that.

17 (Plaintiff's Exhibit 24 was marked for
18 identification.)

19 BY MS. MARTIN:

20 Q. Handing you what's been marked
21 Plaintiff's Exhibit 24.

22 A. Uh-huh.

23 Q. Is that your signature at the bottom?

24 A. Yes. That's my report.

25 Q. You can review it if you like.

1 But do you recall this incident now
2 that you've seen the report?

3 A. I don't recall it, no. I've taken
4 thousands of reports.

5 But there's no question this is a
6 report that I took.

7 Q. So in October of 2009, Gary Roell, who
8 was on medication for paranoid psychosis, was off
9 his meds and in Nashville and needed medical
10 care?

11 A. Uh-huh.

12 Q. The next day -- it looks like on the
13 second page -- she reported that he returned home
14 and got treatment for his medical needs?

15 A. Yep.

16 Q. Is the fact that you did this report on
17 Roell something that you can look up in your
18 system in responding to a scene?

19 A. I don't know if this would have shown
20 up on an address history or not. A missing
21 person is not going to show up on a lot of
22 address histories.

23 But I wouldn't have an answer to that
24 question without running an address history and
25 finding out.

1 Q. It looks like Nancy Roell signed this
2 incident report?

3 A. Uh-huh.

4 Q. Did you go to her house or did she come
5 into the department?

6 A. I don't know.

7 Q. Could it have been either way? Or how
8 is it normally done?

9 A. It -- it all depends. Sometimes we go
10 to people's house, sometimes they come to us.

11 I have no idea where this was done.

12 Q. When you said you wouldn't know without
13 doing an address search if this would come up,
14 what do you -- what do you mean?

15 A. We can run an address query sometimes,
16 and it will show past dispatch runs to that
17 location, you know, if they have a domestic
18 violence or something like that.

19 Q. Is that in your MDC in your cruiser?

20 A. Sometimes. Oftentimes, it doesn't work
21 in that and dispatch has to do it.

22 Q. Have you ever used defibrillation?

23 A. No.

24 Q. Do you know whether one would have been
25 appropriate to use after cardiac activity was

1 initially restored?

2 A. Well, when the squad got there and
3 hooked him up, they said they weren't going to
4 shock him. So I would say no.

5 Q. But if cardiac activity was initially
6 restored, when you said that you -- you heard a
7 pulse --

8 A. Oh, I don't know. I have no idea if
9 that would have helped or not.

10 Q. You said that you reviewed an
11 after-action report that you completed?

12 A. Uh-huh.

13 Q. What does that look like?

14 A. An after-action report is -- that's a
15 document that we do on -- on major incidents.
16 It's kind of a self-critique.

17 And so when there's a -- a major
18 incident that occurs, the supervisor that was
19 working on that major incident will do an
20 after-action report.

21 It's a chance to take a look at
22 everything that you did and decide what we did
23 well, what we can do better.

24 That's it right there.

25 MS. MARTIN: Can we go off the record?

<http://www.yeslaw.net/help>

1 THE VIDEOGRAPHER: We're off the
2 record.

3 (Off the record.)

4 THE VIDEOGRAPHER: We're on the record.

5 MS. MARTIN: Can I see that report?

6 (Plaintiff's Exhibit 25 was marked for
7 identification.)

8 BY MS. MARTIN:

9 Q. I'm handing you what's been marked
10 Plaintiff's Exhibit 25.

11 Is this the after-action report that
12 you were describing before we went off the
13 record?

14 A. It was, yes.

15 Q. And then it looks like it's five pages
16 long.

17 Did you fill out all the information in
18 this report?

19 A. I did.

20 Q. When did you fill that out?

21 A. I don't know exactly. It was well
22 after the incident, maybe it could have been --
23 well, would have to be at least six days after
24 the incident, because I was sergeant when I did
25 it.

1 Q. Where did you get the information to
2 fill out this report?

3 A. Information both from speaking with the
4 detectives, from personal knowledge that I had,
5 the CAD record.

6 Q. The detectives that were -- that you
7 spoke with, who were they?

8 A. I don't remember if I got it from
9 Detective Bohan, or it might have been
10 Detective Pfaffl; information in order to write
11 the after-action report.

12 Q. Bohan or --

13 A. It could have been Detective Pfaffl.

14 Q. How do you spell Pfaffl?

15 A. P-f-a-f-f-e-l (sic).

16 Q. And are those the detectives who
17 interviewed the deputies after the incident?

18 A. No. Detective Pfaffl interviewed me.
19 And I believe it was Detective Bohan's case.

20 And so that's why I could have -- it
21 would have been either of those two that I asked.

22 Q. It was Bohan's case as far as a
23 criminal case or an internal investigation?

24 A. Well, it's first investigated
25 criminally. And then it goes internally.

1 So he's the one that looked at the
2 whole thing.

3 Q. Did you take notes about the
4 incident?

5 A. No, no. This is the only -- only thing
6 written that I did about the incident.

7 Q. Let me show you on my computer some
8 notes that are handwritten notes. The page I'm
9 showing you is Bates Number 002396.

10 Do you recognize this handwriting?

11 And I can blow it up and make it a
12 little bit bigger for you.

13 A. It's not mine. I'm not sure whose it
14 is. Yeah, I don't know whose it is.

15 Q. Again, you don't recall making any
16 notes about this incident?

17 A. I don't think I did. Because I went
18 straight back -- I may have grabbed a notepad and
19 jotted a couple things down.

20 But I didn't have any detailed notes,
21 because Matt had the crime scene log. And
22 that -- that would have been the more detailed
23 notes.

24 I don't think I had a notepad with
25 me.

1 Q. And, again, Matt is --

2 A. Deputy Sewall.

3 Q. Deputy Sewall.

4 Did you learn any facts from the
5 interviews of Huddleston, Alexander, or Dalid
6 before you wrote Plaintiff's Exhibit 25?

7 A. Explain that.

8 Q. Did you learn anything about what
9 Deputies Huddleston, Alexander, and Dalid said in
10 their interviews before you wrote this report,
11 Exhibit 25?

12 A. Yeah. I -- I saw their -- I saw some
13 of the statements they had made to the
14 detectives, the summaries of them, in order to
15 get timelines, to get exactly what happened.

16 Q. How much time elapsed from when the
17 deputies were giving verbal commands to Mr. Roell
18 to when they went hands-on with him?

19 A. I don't know. I wasn't there.

20 Q. You say in your report that officers
21 gave verbal commands. That's the second line of
22 the third paragraph in your narrative.

23 A. Okay.

24 Q. So more than one officer gave verbal
25 commands?

1 A. I can't say for certain, because I
2 don't have all the statements in front of me
3 right now.

4 But I would -- it's possible that more
5 than one officer gave a verbal command.

6 Q. The third line down says, Roell charged
7 the officers.

8 What did you mean by that?

9 A. Advancing on the officers.

10 Q. Where did you learn that information?

11 A. I couldn't tell you exactly where it
12 came from. It would have been one of the
13 summaries that I was pulling from.

14 Q. A summary of one of the interviews that
15 the deputies --

16 A. I would -- I would think so, yeah.

17 And that's, essentially, what this is,
18 a summary of those.

19 Q. Where were the deputies located when
20 Mr. Roell supposedly charged them?

21 A. I don't know. I mean, I can go off
22 their statements. I can't tell you personally
23 where they were.

24 Q. Was Deputy Dalid there before anyone
25 went hands-on with Mr. Roell?

1 A. According to -- according to what they
2 told me, the three of them were all there before
3 anything got physical.

4 Q. The last page of your report, page 5 of
5 five --

6 A. Uh-huh.

7 Q. -- you've got a map at the top.

8 Is that something you do in your
9 after-action reports, you put a map of the
10 area?

11 A. Uh-huh.

12 Q. And is that the location where this
13 happened, kind of right in the middle of that
14 map?

15 A. It is. It's difficult to see on here.

16 But there's a marking that shows where
17 the inner perimeter and outer perimeter of the
18 house was of the scene.

19 Q. Oh, there's writing on this on another
20 copy, I just can't see it?

21 A. You can see -- if you look real
22 closely, right there, you can see that's where it
23 indicates crime scene tape is.

24 Q. Oh, the kind of a white line?

25 A. Yeah. Right here. That indicates the

1 perimeter. That is the patio where this all
2 happened.

3 MS. SEARS: Can you highlight that?

4 Would that be all right with you, Jaci, if
5 he highlights it on the original exhibit?

6 MS. MARTIN: Sure.

7 A. And then this is the outer perimeter,
8 if you'd like me to highlight the outer
9 perimeter, as well.

10 So this was the inner perimeter that we
11 established right away.

12 And then when we found all the
13 destruction afterwards is when we extended the
14 outer perimeter.

15 BY MS. MARTIN:

16 Q. When you look at this, you look at it
17 on a computer?

18 A. Yeah. It's on CAGIS maps.

19 Q. And it's a program?

20 A. Right.

21 Q. And this is in color?

22 A. It is.

23 Q. You also have a legend with numbers.

24 Are there numbers that you could see
25 if --

1 A. Uh-huh. If this was in color, you'd be
2 able to see the 1, 2, and the yellow lines.

3 Q. And below the map and the legend
4 there's a box that says, Critique Summary,
5 Lessons Learned.

6 A. Uh-huh.

7 Q. Can you tell me about that?

8 A. The purpose of this -- this is a tool
9 for us to be able to look at things we've done
10 and try and figure out how we can improve on
11 them.

12 So on every after-action report we do a
13 self-critique. And then when you determine what
14 you can do to improve, you put that in here.

15 Q. Tell me about the critique of this
16 incident.

17 A. It says -- do you want me to read it?

18 Q. Sure.

19 A. Okay. It says, During the
20 investigation of this incident, it was determined
21 that there had been prior runs to this address
22 with this individual involving psychological
23 issues.

24 This information was not made
25 available to the officers at the time of

1 dispatch.

2 While unlikely that this information
3 would have changed the outcome, when this is
4 available, we should work with the Hamilton
5 County Communication Center to make sure that the
6 CAD has the information that's needed to assist
7 officers and dispatchers.

8 Q. And you wrote that?

9 A. Uh-huh.

10 Q. Do you still agree with that?

11 A. I do.

12 Q. Do you have any other critiques?

13 A. No, no.

14 Q. Do you understand that Deputies
15 Huddleston, Alexander, and Dalid used force on
16 Gary Roell --

17 A. Yes.

18 Q. -- and that Mr. Roell died as --
19 following that use of force?

20 A. Yes.

21 Q. The coroner ruled the cause of death
22 was excited delirium.

23 A. Yes.

24 Q. You're aware?

25 A. Uh-huh.

1 Q. Do you have any reason to disagree with
2 that?

3 MS. SEARS: Objection.

4 A. No. I'm -- I'm not a coroner or
5 medical examiner. No.

6 BY MS. MARTIN:

7 Q. Did anyone follow up with you after you
8 gave your interview?

9 A. Follow up in what way?

10 Q. As a part of an investigation into the
11 incident?

12 A. No. After my interview was completed,
13 that was it.

14 Q. Well, you filled out the after-action
15 report.

16 A. Right.

17 Q. And did you fill out any other
18 reports?

19 A. I don't think so.

20 Q. Did you answer any other questions from
21 anyone?

22 A. No.

23 Q. Who did you give the after-action
24 report to?

25 A. The after-action report was presented

1 in staff. That's the reason we do these, is we
2 will, like I said, self-critique.

3 Q. What do you mean, presented in staff?

4 A. During a staff meeting, when we have an
5 after-action report, the author of that report
6 presents the after-action report. And we get
7 input as to whether we did things or did not.

8 And if you don't do well, sometimes
9 they can be pretty brutal.

10 Q. Who's present at you staff meetings?

11 A. A staff meeting -- these are presented
12 at joint staff meetings. So this would be
13 sergeants and above from the entire enforcement
14 division and, occasionally, representatives from
15 corrections and core services, as well.

16 Q. How often are those held?

17 A. We have four of those a year, the joint
18 staffs.

19 Q. When was the staff meeting where you
20 presented this after-action report?

21 A. I don't remember.

22 Q. Did you present this after-action
23 report in a staff meeting?

24 A. I did.

25 Q. Did you determine if Deputies

1 Huddleston, Alexander, and Dalid had identified
2 Gary Roell as an excited delirium subject?

3 A. I didn't, no. That investigation was
4 handled by someone else.

5 When there's -- when the use of force
6 results in serious physical harm or death, as a
7 first-line supervisor, we don't do that
8 investigation.

9 Q. Whose job was it to do that
10 investigation?

11 A. That would have been our criminal
12 investigation section.

13 Q. Was that Detective Bohan?

14 A. Whoever was assigned the criminal
15 investigation section.

16 Q. Did you consider that question about
17 whether the deputies identified Gary Roell as an
18 excited delirium subject as part of your
19 after-action report?

20 A. No, because what these are -- are
21 toward our actions and areas that we can improve.

22 Whether or not Mr. Roell was an excited
23 delirium case doesn't change our reaction to a
24 violent encounter.

25 Q. Do you agree that, as a supervisor, you

1 want your officers to identify signs and symptoms
2 of excited delirium?

3 MR. KUNKEL: Objection as to form.

4 You can answer.

5 THE WITNESS: Okay.

6 A. Absolutely. I want people to be able
7 to recognize it, and I want people to be able to
8 identify it.

9 But you also have to respond to the
10 immediate threats that are there.

11 BY MS. MARTIN:

12 Q. Were you counseled or disciplined by
13 the Hamilton County Sheriff's Office for your
14 role in the incident with Mr. Roell?

15 A. No.

16 MS. SEARS: Objection.

17 THE WITNESS: Oh.

18 MS. SEARS: Just give me a second.

19 That's all right.

20 BY MS. MARTIN:

21 Q. Were you provided any retraining based
22 on the way you handled the incident of
23 Mr. Roell?

24 A. No.

25 Q. Are you aware of any policy changes at

1 Hamilton County Sheriff's Office as a result of
2 the incident with Mr. Roell?

3 MS. SEARS: Objection.

4 A. I'm not aware of any.

5 BY MS. MARTIN:

6 Q. So you've been trained on excited
7 delirium, right?

8 A. I have.

9 Q. And you're aware of the symptoms?

10 A. Uh-huh.

11 Q. And they can include when a person is
12 aggressive, correct --

13 A. I'm sorry. Yes.

14 Q. -- and combative --

15 A. Yes.

16 Q. -- hyperactive --

17 A. Hyper -- hyperactive, yes.

18 Q. The person had unexpected strength --

19 A. Yes.

20 Q. -- incoherent shouting --

21 A. Yes.

22 Q. -- shedding of clothes --

23 A. Yes.

24 Q. -- wet from sweat?

25 A. Yes.

1 Q. And you knew prior to
2 August 13th, 2013 that excited delirium is a
3 medical emergency?

4 A. Yes.

5 Q. And for that reason, it's important to
6 have EMS ready immediately when you gain control
7 of a person?

8 A. It's preferred. But it's not always
9 practical or even possible.

10 Q. There's training -- slides for a
11 training in Exhibit 2.

12 Did you take this training?

13 A. Yes.

14 Q. If you turn to -- there's Bates numbers
15 in the corner here.

16 A. Okay.

17 Q. If you turn to 004488, please, the
18 second sentence on this slide that starts with
19 Usually --

20 A. Uh-huh.

21 Q. -- do you see that?

22 It says, Usually within minutes of
23 being restrained the victim loses all vitals
24 signs.

25 Did I read that correctly?

1 A. Yes.

2 Q. For that reason, it's important to have
3 EMS nearby when you gain control of an excited
4 delirium subject, right?

5 A. It would be preferred.

6 We -- we have to act on what EMS will
7 do, though.

8 If an excited delirium person is
9 combative -- which by the very nature of excited
10 delirium, oftentimes they're going to be
11 combative.

12 Anyone that's combative -- the life
13 squad will not respond until that person is
14 controlled.

15 The only way you can control somebody
16 that is combative is to restrain them. So they
17 won't respond, they won't be there until you have
18 them under control.

19 Q. In order to get EMS nearby, all you
20 have to do is push a button on your radio and
21 call for EMS, right?

22 A. Right.

23 Q. So you just move your hand to your
24 shoulder -- your radio is on your shoulder
25 usually -- and you say, EMS requested?

1 A. Right. You request a squad.

2 Q. And the closer the squad is when you've
3 got the person under control, the better,
4 right?

5 A. Yes.

6 Q. In your excited delirium training, did
7 you do any hands-on scenario-based trainings?

8 A. No, no. It was web-based.

9 Q. Were you trained to take a person's
10 mental health into consideration in deciding what
11 level of force to use?

12 A. If you can, yes.

13 The level of force used is in response
14 to the force used against you.

15 So if you're able to take that into
16 account, you do, if you're not able to, you
17 don't.

18 Q. And you were trained that you should
19 de-escalate a situation in which a person is
20 having a mental health crisis?

21 A. Yes. You're trained to try to do
22 that.

23 Q. And if a person has excited delirium,
24 it's important to de-escalate, because the person
25 could die, right?

1 A. Right.

2 Q. Have you ever engaged with a mentally
3 ill subject?

4 A. Yes.

5 Q. Approximately how many times?

6 A. I couldn't even give an estimate; many,
7 many, many times.

8 Q. You know with a mentally ill person
9 it's important to de-escalate so you don't get
10 hurt, right --

11 A. Yes.

12 Q. -- and so the subject doesn't get
13 hurt?

14 A. Right.

15 Q. And it's especially important to
16 de-escalate when there's not a gun or a knife or
17 another serious weapon involved, right?

18 MR. KUNKEL: Objection as to form.

19 Go ahead. You can answer.

20 A. De-escalation is important in
21 everything that we do.

22 It's important in mental health issues,
23 it's important in domestic issues, because it
24 does avoid an injury to you or to them.

25 But de-escalation only works if the

<http://www.yeslaw.net/help>

1 person isn't currently violent. And you can't --
2 you can't talk someone's fist off of your face.

3 You -- you can only de-escalate someone
4 if they'll allow you to engage in a conversation
5 with them.

6 BY MS. MARTIN:

7 Q. Your training is that a person's
8 behaviors when they are having a mental health
9 crisis are a result of their medical issue,
10 right?

11 A. Yes.

12 Q. And that's why you take that mental
13 illness into account --

14 A. Yes.

15 Q. -- in dealing with them?

16 A. Yes. When you can, yes.

17 Q. It's especially important to take time
18 to de-escalate a situation with a mentally ill
19 person when the crime they committed is not a
20 very serious one, right?

21 MS. SEARS: Objection as to form.

22 A. I would agree that it's important to
23 take into consideration the totality of the
24 circumstances and all these things.

25 You want to look at what threat this

1 person poses to themselves and to others. And
2 you want to look at if this person is going to
3 hurt themselves or someone else. And you want to
4 take all that into consideration.

5 If you have to stop this person from
6 potentially hurting themselves or someone else,
7 you may not have time to de-escalate.

8 BY MS. MARTIN:

9 Q. Do you know what positional
10 asphyxiation is?

11 A. I do.

12 Q. What is it?

13 A. It's when a person is unable to breathe
14 due to their diaphragm not being able to
15 withstand a position that they're put in when
16 restrained.

17 Q. Do you know some of the things to look
18 out for?

19 A. Yes. You don't want someone to spend a
20 lot of time either on their front or back.

21 You know, so you want to get someone
22 into a recovery position once they're restrained.

23 Q. That's especially true if they're an
24 older person, right?

25 MS. SEARS: Objection as to form.

1 A. It's true with everyone.

2 Older people, overweight people, are
3 more susceptible to positional asphyxiation.

4 BY MS. MARTIN:

5 Q. If a person is panicking, that might be
6 a sign that positional asphyxiation is -- is
7 imminent?

8 A. I don't -- I don't know if panicking
9 would be a sign or not.

10 Q. A person is struggling to breathe --

11 A. Yeah.

12 Q. -- that might be a sign?

13 A. Yeah.

14 Q. The person suddenly goes limp?

15 A. Yes.

16 Q. If the person is known or suspected to
17 be suffering from excited delirium?

18 MS. SEARS: Objection.

19 A. Well, I mean, those are two different
20 things. Excited delirium and positional asphyxia
21 are not necessarily the same thing, if that's
22 what you're getting at there.

23 BY MS. MARTIN:

24 Q. One reason for the handcuffing policy
25 at Hamilton County Sheriff's Office to put

1 someone in a recovery position, as you've
2 described it, after they're handcuffed is to
3 avoid positional asphyxiation, right?

4 MS. SEARS: Objection.

5 Asked and answered.

6 A. Okay. Once someone is under control is
7 when we move them into a recovery position, and
8 then you're -- in your -- to avoid positional
9 asphyxiation.

10 BY MS. MARTIN:

11 Q. Did you talk to Deputies Huddleston,
12 Alexander, and Dalid after the -- the
13 night of August 13th, 2013 about the incident?

14 A. Yes. When it was all said and done and
15 the investigation was complete, we talked
16 extensively about it.

17 Q. When was that?

18 A. I don't -- it was -- I don't know. I
19 couldn't tell you anywhere near when it was done.

20 But when we were advised that the
21 investigation was complete, then, yes, I talked
22 to them.

23 They were -- yeah. They were newer
24 officers. They were very shaken up. So I
25 wanted to check on how they were doing.

1 Q. Where were you when you had this
2 conversation?

3 A. I talked to them at -- excuse me -- at
4 the district. I talked to them on the phone.

5 Q. Did you talk to them all together?

6 A. I don't think the three of us have ever
7 sat down and talked -- or the four of us, it
8 would be -- have ever sat down and talked at the
9 same time.

10 But I'm sure that I've -- I worked with
11 them. So I'm sure the two or three of us have
12 sat around or -- I don't know.

13 Q. So approximately on how many occasions
14 have you discussed the incident?

15 A. I have no idea. I mean, I don't
16 know.

17 Q. More than 5, less than 20?

18 A. I don't know. I don't know.

19 We've talked about it. It's something
20 that would come up relatively often when it
21 was -- when everything was fresh.

22 Q. Are you friends with them outside of
23 work?

24 A. No. I don't socialize with them
25 outside of work or anything like that.

1 I don't dislike them. We're just
2 not -- I don't hang out with too many police
3 officers outside of work.

4 Q. Did you have crisis intervention
5 training?

6 A. Yes.

7 Q. When did you do that?

8 A. I think it was in late 2013.

9 Q. Before or after the incident?

10 A. It would have been after.

11 Q. Was it -- did you get that training in
12 response to this incident?

13 A. No. It was available. And they had a
14 spot open for a sergeant, and I volunteered for
15 it.

16 Q. Who put it on?

17 A. Liz Atwell was the instructor's -- main
18 instructor's name. But I can't remember the --
19 all the sponsoring agencies involved. But
20 Springfield Township Police Department hosted it.

21 And it was a good class.

22 Q. Was there scenario-based training?

23 A. There was. There was scenario-based
24 training. We went out and spent a day working
25 with the social workers and things like that.

1 Q. Who does Liz Atwell work for?

2 A. I don't know, one of the -- one of the
3 sponsoring organizations.

4 Q. Is there anything in those
5 conversations you had with Deputies Huddleston,
6 Alexander, and Dalid after the incident -- is
7 there anything they told you that you haven't
8 told us about here today?

9 A. Just they -- I mean, they were fearful.
10 You know, they were worried that, being new
11 officers, that someone -- that they might be
12 looked at differently.

13 It bothered them that Mr. Roell died.
14 They were -- they were shaken up for it.

15 Q. They were fearful -- you said they were
16 fearful. And you're referring to -- about --
17 they were fearful about the way they would be
18 perceived because of this incident?

19 A. Well, with the investigation that was
20 going on, as a new officer, you're -- you're
21 nervous because you're part of a criminal
22 investigation.

23 I was -- as any officer, you're nervous
24 when you're part of a criminal investigation. So
25 they were very nervous about that.

1 Q. Is there anything else they told you
2 that you haven't told us about?

3 A. Not that I can think of.

4 Q. Did you talk to Deputies Huddleston,
5 Alexander, and Dalid after the complaint and this
6 case had been filed?

7 A. I don't think I have talked to them,
8 except for a brief call to see how they're doing,
9 since -- since this has been filed, because I've
10 been promoted and transferred after that.

11 Q. So you don't work with them anymore?

12 A. No.

13 Q. Did you only work with them for a few
14 days until you were promoted to sergeant?

15 A. I had worked with them since they had
16 been promoted to patrol division.

17 And then shortly after this incident is
18 when I was promoted. And that's when I was
19 transferred.

20 Q. So you stopped working with them in
21 late August 2013?

22 A. Yes, yes.

23 Q. How long ago was that that you called
24 them to see if they were okay?

25 A. I don't know. I have no idea.

1 I just remember being surprised that
2 there was a lawsuit and -- and calling to check
3 on them and see how they felt.

4 Q. How did they feel?

5 A. They were shocked, also.

6 No one expected a lawsuit to come out
7 of this.

8 Q. Before your 2013 crisis intervention
9 training, had you had any other crisis
10 intervention training?

11 A. Just whatever is taught in the academy.

12 Q. Do you know, on August 13th, 2013, if
13 any officers had crisis intervention training at
14 the Hamilton County Sheriff's Office?

15 A. The -- are you speaking of the class
16 that I went to, or --

17 Q. Yes, that type of class.

18 A. I don't know if anybody else had gone
19 to any of those classes or not. So, no, I don't
20 know.

21 Q. Was there any type of team that can be
22 called out for that --

23 A. No, there's not.

24 Q. Did you have a mobile crisis team from
25 another agency available to you if you needed

1 one?

2 A. No.

3 Q. Did you have a mental health hotline
4 available to you?

5 A. Are you -- for this incident?

6 Q. Yeah, on August 13th, 2013.

7 A. Available to us, no.

8 I mean, there's -- yes, there's
9 hotlines. But you don't have a chance to call
10 them when someone's fighting with you.

11 Q. Is there a hotline specifically
12 available to Hamilton County Sheriff's Office
13 employees if they encounter someone with a mental
14 health crisis?

15 A. It's not specific to just Hamilton
16 County, but there -- there are hotlines you can
17 call -- any police agency can call someone.

18 Q. You ever utilized one?

19 A. Yes, I have.

20 Q. Tell me about that.

21 A. It was a case in a different part of
22 Sycamore Township, in southern Sycamore Township,
23 where we had frequent runs to a -- to a house.

24 And the family there had asked for
25 help. And we were able to get them some help.

1 Q. What was wrong with the person?

2 A. I don't remember the exact diagnosis.

3 But they were -- it was a mental issue.

4 Q. What was the hotline able to do for
5 you?

6 A. They sent somebody out from -- I think
7 it was mobile crisis or one of those groups to
8 meet with them.

9 Q. Was it a good result?

10 A. I don't know. They ended up -- we --
11 we left when mobile crisis took over. So I don't
12 know how -- how it panned out.

13 Q. Prior to August 13th, 2013, do you feel
14 that you had all the training you needed from the
15 Hamilton County Sheriff's Office?

16 MS. SEARS: Objection.

17 A. I -- I felt that I was trained properly
18 to do my job, yes.

19 BY MS. MARTIN:

20 Q. Was there ever any training that you've
21 requested before or since August 13th, 2013 that
22 was not provided to you?

23 MS. SEARS: Objection.

24 You can answer.

25 A. I don't think I've been turned down for

1 any training since then.

2 Is that the -- that's the question
3 you're asking me, is if -- if I've been turned
4 down for any training?

5 BY MS. MARTIN:

6 Q. Yeah. I had asked before or since.

7 A. I'm sure sometime in my career there's
8 been sometime that I was turned down for
9 training. I don't think I've been turned down
10 for any recently.

11 Q. What kind of training in your history
12 further back were you turned down for?

13 A. I'm not sure what -- I'm -- I was --
14 I'm speculating that I have. I know there's been
15 times when you can put in for something and you
16 don't get it.

17 Q. Was there a period after 2008 and
18 before Sheriff Neil took office when training was
19 suspended at the Hamilton County Sheriff's
20 Office?

21 MS. SEARS: Objection.

22 A. There was a time when training was
23 drastically cut, yes, but -- not suspended, but
24 it was cut.

25 BY MS. MARTIN:

1 Q. When was that?

2 A. A budget crunch beginning right around
3 2009 when in-service training was shortened.

4 Q. How did things change then?

5 MS. SEARS: Objection as to form.

6 A. We went from a -- five-days of
7 in-service training to two days, sometimes -- and
8 I believe one year we had just one day.
9 That would have been service training
10 for the year.

11 BY MS. MARTIN:

12 Q. Is it still that way?

13 A. No, no. We have an entire week.

14 Q. When did things change? Was it after
15 Sheriff Neil took office?

16 A. It was.

17 Q. Was it before the August 13th, 2013
18 incident?

19 A. Well, I'm not sure. I'd have to look
20 and see when Sheriff Neil was elected and what
21 year that would have been. I don't know.

22 Q. How soon after he was elected did the
23 changes -- were the changes made to the
24 training?

25 A. The very first year that Sheriff Neil

1 took office, we had a full week of in-service
2 training out here.

3 Q. Was it something he instituted as soon
4 as he took office?

5 A. Well, in-service training is done in
6 the late summer months. Because you have to
7 schedule it when you're going to have people
8 there to attend it.

9 So in-service training, generally,
10 begins at the end of August, and it runs through
11 November.

12 Q. You had some letters in your file that
13 were praising you for the way you handled mental
14 health subjects in the past.

15 A. Uh-huh.

16 Q. You're familiar with that?

17 A. I haven't reviewed my file in a long
18 time. But I've received some letters.

19 Q. In 2008 you transported a mentally ill
20 person to the psych emergency room department and
21 received a letter from the family thanking you
22 for your service with that?

23 A. Uh-huh.

24 Q. Do you recall the details of that
25 incident?

1 A. I don't. I'd have to read it to recall
2 it.

3 Q. Looks like you had two in 2008.
4 Do you recall that?

5 A. I know we had one -- there was a
6 suicidal person that I got rescue accommodations
7 for. And I -- I'd have to -- if you want me to
8 look at it, I can probably remember it.

9 Q. Sure. Here, I'll show you, tab
10 2008, 1; 2008, 2. And then there's 2011 at the
11 bottom.

12 A. The 2011 was the suicidal -- oh, I
13 remember these vaguely but not -- the 2011 one, I
14 remember pretty detailed. But the other two, I
15 remember vaguely.

16 Q. In the 2008 incidents, did you use your
17 training on de-escalating a mental health issue
18 with these people?

19 A. I don't remember if I had to -- I
20 certainly didn't escalate the situation.

21 I don't remember if I had to
22 de-escalate the situation. It was more a matter
23 of convincing her to go to the hospital with me.

24 Instead of having to force her, you
25 know, grab ahold of her, I was able to convince

1 her to go to the hospital with me, because she
2 wasn't violent or anything like that.

3 Q. But you had to use special care with
4 these people, right, because they were suffering
5 from a mental illness?

6 MS. SEARS: Objection as to the form
7 and to the extent he understands it.

8 So go ahead and answer.

9 A. Yeah. We -- we always do the best we
10 can to make sure that people are taken care of.

11 BY MS. MARTIN:

12 Q. Did you utilize a mental hotline or
13 mobile crisis unit with any of these incidents?

14 A. No. I didn't have to. They had family
15 members that were there with them that were able
16 to explain the health problems that the person in
17 crisis was dealing with.

18 MS. MARTIN: Nothing further.

19 EXAMINATION

20 BY MS. SEARS:

21 Q. So you had some conversation with
22 opposing counsel about the mobile crisis unit and
23 the extent to which you've utilized it personally
24 in these instances that you've been involved in.

25 A. Uh-huh.

1 Q. Can you tell me what, if any,
2 perspective you have on the use of the mobile
3 crisis unit in the scope of the assisting county
4 agencies with incidents outside the city, inside
5 the county?

6 A. Right. There -- mobile crisis is --
7 the primary area where they respond is inside the
8 City of Cincinnati limits. And they work with
9 teams in the City of Cincinnati to do those
10 things.

11 It's rare to be able to get them to
12 come out to the county. You can, and in those
13 instances, they're very, very, helpful. But it's
14 not a resource that's always available to you.

15 Normally, what we have to do is handle
16 the -- handle the situation the best way possible
17 and then transport that person to Deaconess or
18 one of the other psychiatric facilities.

19 Q. What's your experience with the
20 response time of mobile crisis to a county -- a
21 county call, a call in -- in the scope of your
22 employment, what's your personal experience?

23 A. It takes quite a bit of time.

24 Like I said, they're generally focusing
25 inside the City of Cincinnati limits and by the

1 nature of our contract service, we're spread out,
2 and the -- the township's pretty far.

3 So in order to get them to come, if
4 they're available to come from in the heart of
5 the city to out in Sycamore Township, it's going
6 to maybe be an hour response.

7 Q. And I thought in response to one of
8 Ms. Martin's questions, you had indicated in the
9 particular case that you recall them responding,
10 they were -- they took over and you left?

11 A. Right. This was at the request of the
12 family. But they just didn't know where to go.

13 So a lot of times people don't know
14 what to do. They called the police, and we went
15 there.

16 And we were able to get ahold of mobile
17 crisis and hang out with the family until mobile
18 crisis got there to handle the situation.

19 Q. And so this particular person, were
20 they combative?

21 A. No.

22 Q. Were they aggressive?

23 A. Suicidal, depressed.

24 Q. So the antithesis of being combative?

25 A. Right.

1 Q. More of a depressive affect?

2 A. Right.

3 Q. So am I correct then they were not
4 hyperactive?

5 A. No.

6 Q. And they were not naked?

7 A. No.

8 Q. And did this person charge at anyone,
9 any law enforcement officer?

10 A. No.

11 Q. And family was present?

12 A. Yes. Yeah, the family was there and
13 knew what was going on.

14 Q. And then if someone were presenting as
15 combative or aggressive, in that scenario, would
16 you have -- would you have left the scene?

17 A. No, absolutely not.

18 If -- and if someone was combative or
19 aggressive, we couldn't have called the mobile
20 crisis, either.

21 Q. Oh, really? Why?

22 A. Because they're not going to go in on a
23 combative person.

24 We -- mobile crisis respond --
25 they're -- they're able -- their resources are

1 there for us once we've got the situation
2 controlled.

3 If -- if we're called for someone
4 that's out of control and violent, it's our job
5 to get them under control and nonviolent before
6 any of the other resources that could possibly
7 help this person could be used.

8 Q. And in your experience with the mobile
9 crisis, what kind of resource do they bring to a
10 scene?

11 Let's just say you have someone who is
12 combative and out of control. You place them
13 into custody and get them under control and you
14 call mobile crisis.

15 What resource do they bring to you at
16 that point that you don't already have?

17 A. Sometimes they'll -- well, when I
18 worked with them in the city -- because I worked
19 in Over the Rhine for a few years on a task
20 force. So I worked with them in the city.

21 Q. Uh-huh.

22 A. And oftentimes in the city, the mobile
23 crisis was familiar with them.

24 Q. Familiar with the person?

25 A. With the individual, yes.

1 And so that was helpful.

2 In the county, though -- really the
3 only one I can think of is that one I was talking
4 about earlier, where -- and what they brought to
5 the scene there was just someone that was --
6 excuse me -- that was better at talking to this
7 depressed person than I was.

8 Q. You're not a therapist.

9 A. Right.

10 Q. Once you get someone who is combative
11 and aggressive out of control -- in custody and
12 under control -- okay?

13 A. Uh-huh.

14 Q. Do you then, as law enforcement, have
15 to determine what in the heck you're going to do
16 with them?

17 A. Yes.

18 Q. Is one of your options charging them
19 with a crime?

20 A. Yes.

21 Q. And is one of your options taking them
22 for a hospitalization either in lieu of charging
23 them or prior to charging them?

24 Are those options for you?

25 A. Those are all options. And sometimes

1 you may do them all.

2 It's -- depending, if we determine that
3 this person -- his actions were the result of a
4 mental illness and he wasn't deliberately trying
5 to hurt someone, that person is probably going to
6 be just given an involuntary admission into the
7 hospital.

8 Sometimes it will be an involuntary
9 admission into the hospital and there will be
10 criminal charges that are filed, also.

11 But, yes, once the person is under
12 control, then you start making that
13 determination.

14 So what do we have? Do we have a
15 crime, or do we have a medical issue?

16 Q. And would the EMT be a resource in
17 determining whether there is a medical issue or
18 not?

19 A. At times. There have been instances
20 where we had a situation where there was a use of
21 force. And the EMS got on the scene after we got
22 the person under control.

23 We found out that he was in a diabetic
24 crisis. And he -- he did not face any charges,
25 you know, because the EMTs were able to explain

1 what was going on.

2 When they got him the medicine he
3 needed, he was fine. So we didn't press any
4 charges on him, even though there had been a use
5 of force.

6 Q. And even though there was probable
7 cause?

8 A. Right.

9 Q. Oh, I know what I was going to ask you.

10 So in terms of mobile crisis or the
11 EMTs, do you order them on scene, or do they have
12 the discretion whether to come on scene and
13 approach a subject?

14 A. They now have the discretion. We -- we
15 can't order them into any scene.

16 We can ask for mobile crisis. And
17 they're not usually very available for us in the
18 county. And we ask for a squad to respond.

19 But the squad has their rules on when
20 they can approach scene and what type of scenes
21 they're going to go to.

22 Q. And would you -- would you have any --
23 would you be able to say whether your experience
24 with mobile crisis, the ones you've personally
25 described to us, is that an experience that's

1 known by your coworkers?

2 A. Not much, because they're not seen in
3 the county very often. So people don't call
4 them, because they're not -- you don't see them
5 out there.

6 And unless you've worked in the city,
7 you probably don't even know about them.

8 Q. You indicated you've taken this crisis
9 intervention training, right?

10 A. Yes, uh-huh.

11 Q. And was NAMI one of the entities that
12 presented at this training?

13 A. Yes.

14 Q. You're familiar with NAMI?

15 A. I am familiar with NAMI.

16 There were several different
17 organizations that were involved. I know NAMI
18 was one of them.

19 Q. Okay. And then with regard to this
20 training, was excited delirium the topic of the
21 crisis intervention?

22 A. I don't believe it was. We went over
23 mostly schizophrenia, other psychoses, and how
24 to -- how to recognize issues and how to talk to
25 people who are having issues and what resources

1 to reach out to when you're dealing with someone.

2 Q. And then you had indicated that kind of
3 prior to this incident with Mr. Roell, you
4 experienced roll call or an on-line excited
5 delirium training; is that correct?

6 A. Yes.

7 Q. And did you become aware in the excited
8 delirium training that persons in the throes, if
9 you will, of an excited delirium episode do not
10 respond to verbal de-escalation techniques?

11 Were you aware of that?

12 A. I -- I know that they don't speak
13 coherently. They don't respond to much of
14 anything.

15 Q. In terms of -- oh, and anything -- by
16 anything, what do you mean?

17 A. They don't respond to physical force,
18 verbal force.

19 It's one of the main things of excited
20 delirium, is that just nothing's working on them.

21 Q. And in your excited delirium training,
22 did you become aware that law enforcement is to
23 get the person physically restrained as soon as
24 possible to end the physicality of the -- the
25 person and the person's physical interaction?

1 A. Yeah. If this person is violent toward
2 themselves or others, you have to get them
3 restrained right away.

4 And then we get them medical
5 treatment.

6 Q. In your crisis intervention training
7 that you discussed, the one that NAMI was
8 present, you said you discussed some
9 de-escalation kind of things in that training; is
10 that right?

11 A. Yeah.

12 Q. Was there any discussion of this
13 suspension of that sort of technique when the
14 person was combative or violent toward you?

15 A. Yes. That's one of the things that
16 they -- they brought up right away: We want to
17 teach you how to help deal with people in crisis,
18 but you need to be safe, to take care of yourself
19 first.

20 If someone is violent, they're
21 combative, you have to get them restrained.

22 If they're nonviolent and they're just
23 off, or maybe they're screaming but they're not
24 violent, then that's when you can you employ some
25 of the techniques they were teaching us.

1 But if someone is using violence, you
2 have to stop that violence. You have to counter
3 the force.

4 Q. And in terms of law enforcement, does
5 law enforcement -- are you trained to wait until
6 someone actually uses force, or are you trained
7 to assess the risk of harm and to prevent harm
8 from happening?

9 A. We're trained to respond to the threat
10 that is presented to us, that is either presented
11 to us or to someone else.

12 And whatever the threat poses, we -- we
13 do what we have to do to neutralize that threat.

14 Q. So we've heard some mention of
15 something called the reaction gap, or I'm not
16 sure exactly what the right term is.

17 A. Reactionary gap.

18 Q. Reactionary gap.

19 Do you have some -- are you trained in
20 law enforcement not to allow a subject within the
21 reactionary gap?

22 A. Yes. And there's several different
23 areas of reactionary gap.

24 The initial encounter with someone, you
25 need to have a good five, six feet between you

1 and that person.

2 If someone's armed with any type of
3 weapon, the reactionary gap is 20 feet. So --

4 Q. Depending on the weapon?

5 A. Depending on if someone has a weapon of
6 any type.

7 For example, a person 20 feet away from
8 you with a knife or rock can hit you with that
9 before you can draw your pistol and fire.

10 So the reactionary gap was different
11 with an armed subject as opposed to someone who
12 is unarmed.

13 Q. And are these basically split-second
14 assessments that a law enforcement officer must
15 make at the time when you perceive the subject
16 and then evaluate the potential threat?

17 A. Right. When you -- when you first
18 encounter someone, you have no idea what you have
19 until you encounter them. The only way you can
20 figure out if this is a threat or not is to
21 encounter the person.

22 And so once you make that encounter,
23 then you have to make the determination, is this
24 person a threat to me or someone else; and then,
25 am I in the proper placement; and then, take

1 immediate action.

2 And that all has to happen within a
3 split second to prevent someone from getting
4 hurt.

5 Q. And even if you have -- well, let me
6 ask you this.

7 Let's say you had a fairly extensive
8 relationship and history with someone, not a
9 personal situation, but you're going to the same
10 place for a D&D run about every day of the week
11 and you always find Martha and Fred and they're
12 usually drunk and it's usually blah, blah,
13 whatever it is. Okay?

14 A. Right.

15 Q. Tell me about responding to that
16 situation.

17 Are there some concerns or limitations
18 in assuming too much about a situation that might
19 cause a tactical problem for a law enforcement
20 officer?

21 A. Well, you can get complacent. And if
22 you continue to show up at that same house time
23 and time again, and this time you tell your
24 partner, hey, I'll handle this one by myself, and
25 you go in and all of a sudden things blow up on

1 you, maybe this time it's a worse fight than it's
2 ever been before; that's a danger from being
3 complacent.

4 Is that what you meant?

5 Q. Yes. I was wondering about -- we've
6 had a lot of conversation about if you had known
7 this and if you had this information and if you
8 had this premises history -- and, in fact, I'll
9 get to your critique in a second.

10 And then I was wondering about the
11 distinction -- or how you as a law enforcement
12 officer maintain your vigilance when you might
13 have information that a situation could blow up
14 on you, like you suggested.

15 So that's what I was wondering about.

16 A. Yeah. And it happens. Sometimes you
17 get complacent.

18 Q. Is that something that -- that you're
19 trained to guard against? Or is it something
20 that you train your supervisees or, you know,
21 your young officers to guard against?

22 A. It's something you are trained to guard
23 against because, again, there's a saying:
24 complacency kills.

25 So it's something that you --

1 Q. There's a saying that
2 complacency kills?

3 A. Complacency kills.

4 It is something that you train yourself
5 to guard against.

6 It's something that -- the reasons I
7 was a field training officer for many years was
8 that it kept me sharp. By training the newer
9 cops, I stayed sharp.

10 And that's -- if you ask a lot of
11 different field training officers, they'll tell
12 you the same thing. That's why they enjoy field
13 training, because it keeps them sharp.

14 Q. So for example, in this situation, with
15 regard to Mr. Roell -- and I know you weren't
16 there, so this is a hypothetical.

17 But let's say that you knew Mr. Roell,
18 and you had responded there on a prior occasion,
19 and you were able to speak with him and talk with
20 him and get him to go to the hospital. All
21 right?

22 A. Uh-huh.

23 Q. And then you respond this time to his
24 residence, and he starts running at you.

25 Is there -- is that what you're talking

1 about, some complacency might let him get too
2 close to you before you react to him?

3 A. No. In that case, it -- it doesn't
4 matter if I know the person or not. If someone
5 starts running at me or if someone is posing a
6 threat to me, I'm going to take appropriate
7 action on that.

8 Where the complacency comes in, is if
9 you -- if you have a familiarity with someone
10 because of prior runs --

11 Q. Uh-huh.

12 A. -- and you're not prepared for
13 anything, you're not ready for the one part
14 that -- you know, the guy that you've known all
15 these years, all of a sudden, he pulls a knife
16 out.

17 Q. Yeah. I was thinking of one example.
18 Fred has a gun this time --

19 A. Yeah.

20 Q. -- and never --

21 A. And never had one in the past.

22 And that's -- that's when complacency
23 gets you. It's -- you know, reacting to the
24 imminent or the immediate threat, that -- that
25 really doesn't change.

1 It's just not being prepared for the
2 immediate threat that might change.

3 Q. I see. Okay.

4 Can we just look at Exhibit 17 --
5 Plaintiff's Exhibit 17?

6 A. Is that in here?

7 Q. Yes, it is.

8 This is the incident recall history or
9 report. I don't know what the term is for it. I
10 always think of it as a CAD report. So I didn't
11 know it had another name.

12 You had discussed with Ms. Martin the
13 two requests for EMS.

14 A. Uh-huh.

15 Q. On this CAD report, I see one request
16 for EMS at 2:57.

17 A. 9 Paul 31, request EMS.

18 Q. And then the next is 2:58, looks like
19 the fire unit was dispatched, right?

20 A. Looks like a fire dispatch at 2:58,
21 yes.

22 Q. Uh-huh. And then it looks like the
23 next time there's a fire-related dispatch or
24 entry on this report is at 3:04.

25 And that looks like it was an update --

1 an update, I guess, in response to the CPR in
2 progress --

3 A. Uh-huh.

4 Q. -- right?

5 A. Yes.

6 Q. Could it be that one of the officers'
7 initial call for EMS was on the east channel, and
8 then called the second time on the county
9 channel?

10 A. That's possible.

11 Q. You had both radios with you, you
12 said?

13 A. I did.

14 Q. And you'd have both of them -- you'd be
15 keyed in to each channel?

16 A. I would have one on northeast and one
17 on -- yeah.

18 Q. That's a bad question.

19 Your answer is right. My question
20 is -- so you had -- you were listening to both
21 channels simultaneously?

22 A. Correct.

23 It's also possible that, since EMS had
24 already been requested, that they just didn't
25 make an entry for it.

1 Q. They didn't dispatch it again. So
2 that's another possibility.

3 A. Right.

4 Q. Okay.

5 A. Since they had already made a dispatch
6 to that address, a second request for dispatch
7 might -- probably wouldn't generate a second
8 dispatch.

9 Q. Okay. Fair enough. So it could be
10 either of those things?

11 A. Right.

12 Q. All right. And did you later -- you
13 talked with Ms. Martin about who was there when
14 you got there. Were you aware how -- how
15 Sewall's arrival was in relation to yours at the
16 time?

17 A. At the time, I didn't know.
18 Afterwards, I learned that he arrived just
19 seconds before I did.

20 Q. When you arrived on scene, you didn't
21 see him?

22 A. When I arrived on scene, I did see
23 Officer Sewall.

24 Q. Oh, when I say on scene -- I meant like
25 when you pulled into the complex.

1 A. Okay.

2 Q. I'm sorry.

3 A. When I think of the scene, I picture
4 myself at the --

5 Q. Yeah. I'm sorry.

6 A. That's okay.

7 Q. We've had some conversation of being on
8 scene and not really being -- in this case, by
9 the patio area.

10 So I was just using that terminology.

11 Let me re-ask it, because I didn't ask
12 you very well.

13 When you arrived at the condo complex
14 in the front of the complex, before you went
15 around to the back, did you observe
16 Officer -- Deputy Sewall?

17 A. No.

18 Q. And did you see a car that you knew was
19 his?

20 A. There were cars there. I didn't know
21 whose was whose, though.

22 Q. And when you got to the back patio
23 area, were you aware at the time that
24 Corporal Gilliland was there?

25 A. I was not.

1 Q. Did you later find out that he arrived
2 before you?

3 A. Yeah. When I was doing CPR on
4 Mr. Roell, that's when Gilliland came out from
5 inside of the residence.

6 And that was the first time I learned
7 Corporal Gilliland was on scene.

8 Q. You discussed with Ms. Martin the
9 performance of CPR, right?

10 A. Yes.

11 Q. And were you doing chest compressions?

12 A. Chest compressions, yes.

13 Q. And can you just describe for me those
14 chest compressions?

15 A. You place the heel of your hand, two
16 fingers above the xiphoid process, put your other
17 hand on top of your hand, your weight over your
18 hands, straighten your shoulders, and you use the
19 weight of your chest and body to compress the
20 chest two inches, two-and-a-half inches.

21 Q. And how much do you weigh?

22 A. About 220 pounds.

23 Q. And is that CPR process, I guess -- is
24 it a fairly violent process?

25 A. It is. It is.

1 I've performed CPR many times on my
2 job. And it oftentimes it results in broken
3 ribs.

4 Q. I've heard that you're not doing it
5 right sometimes if you aren't breaking some ribs.

6 Have you heard that?

7 A. That's what my wife tells me.

8 My wife's an emergency room nurse. And
9 she says if you -- if you're not breaking ribs,
10 you are not getting a good enough compression.

11 Q. So you're coming down with your full
12 weight on Mr. Roell's chest?

13 A. Well, your upper body -- you're
14 straightening your arms out. And then that way,
15 it lessens fatigue.

16 If you try to push like this, you're
17 going to end up thrusting upwards. And it's not
18 going to get a good compression, and it's also --
19 you're going to fatigue very fast.

20 So you're taught to get that weight and
21 just let your body push it forward.

22 Q. You said to Ms. Martin the filling out
23 of what was called a, quote, homicide log; is
24 that right?

25 A. Yes.

1 Q. And can you explain to us the term --
2 why you use the term homicide log?

3 A. Yes. We use a crime scene log in --
4 almost exclusively in our homicide cases.
5 Homicide and suicide is when we use the crime
6 scene log.

7 We very rarely are going to do the
8 crime scene log for -- for -- sometimes an
9 aggravated robbery we may use one.

10 But it's almost exclusively used for
11 homicides and suicides. So that's why I refer to
12 it as a homicide log.

13 Q. And so when you said homicide log
14 instead of crime scene log, the two terms are
15 fairly interchangeable in your -- in your --

16 A. The two terms are synonymous.

17 It's -- and Deputy Sewall understood
18 exactly I meant when I -- when I said it.

19 Q. So the use of the word homicide was --
20 you weren't assuming at that point that you had a
21 homicide or someone had purposely killed someone
22 else?

23 A. Right. That was just assuming -- and
24 rightfully -- that we had a crime scene that we
25 needed to secure.

1 Q. Speaking of that, in your conversation
2 with Ms. Martin, I got a little confused.

3 Was -- when -- after Mr. Roell was
4 taken to -- by the EMTs and after the care of
5 Mr. Roell was overtaken by the EMTs, you
6 indicated that you took some steps to make sure
7 that Officers Dalid -- or Deputies Dalid,
8 Alexander, and Huddleston were kept from -- from
9 speaking about the incident; is that correct?

10 A. Right.

11 Q. And then you had a conversation with
12 Ms. Martin about the crime scene and securing the
13 crime scene.

14 So I was a little confused. So let me
15 ask you, was there a time where those three
16 deputies were outside your physical presence?
17 Other than Officer -- Deputy Dalid going to alert
18 the EMTs to the location, was there a time those
19 three men were outside of your presence prior to
20 them being separated and placed in separate
21 cruisers?

22 A. No, not all three of them. The only
23 one that was out of my presence was Dalid. And
24 that was just to go out and locate the squad.

25 Q. And was that purposeful on your part?

1 A. Yes. That's -- that's why I was
2 directing all those people to do these things,
3 because I was keeping them with me.

4 It wasn't that -- it wasn't that I was
5 just standing there barking orders. I was -- the
6 reason I was directing other people to do
7 different things was that I wanted them there
8 with me.

9 Q. And I think -- I thought I heard you
10 say to maintain the integrity of the
11 investigation --

12 A. Yes.

13 Q. -- the integrity of their statements --

14 A. That's right.

15 Q. -- not have them tainted by having some
16 conversations that someone was not aware of --

17 A. Right.

18 Q. -- regardless of whether they talked
19 about the incident, right?

20 A. Well, yeah. Because what we found in
21 interviewing people is, when three people are
22 involved in the same incident -- or four people
23 involved in the same incident start talking to
24 each other about it, everyone remembers things a
25 little bit differently.

1 And you end up contaminating someone
2 else's memory, and you're telling their story
3 instead of your story.

4 So it's important to keep everybody --
5 and to keep them from talking as much as possible
6 so that everybody is giving their own statement,
7 instead of an accumulation of their statement
8 with their statement with their statement.

9 Q. So you want their memory, not someone's
10 else's memory?

11 A. Exactly.

12 Q. You also responded to Ms. Martin and
13 told her about some conversations that you had
14 with -- a little bit of a conversation you had
15 with them after the incident.

16 When you all three were standing there,
17 they sort of told you some things. And you
18 related to Ms. Martin what those things were,
19 right?

20 A. Right.

21 Q. Prior, though, to coming on scene, you
22 indicated to Ms. Martin you had a -- I guess, a
23 suspicion that you could be dealing with an
24 excited delirium situation.

25 So prior to doing the chest

1 compressions on Mr. Roell, what information did
2 you get, if anything, from the officers about
3 what was happening during that time -- you came
4 around to the patio --

5 A. Uh-huh.

6 Q. -- and you were at the patio before you
7 were performing chest compressions?

8 A. Well, right when I got to the back
9 patio and I said -- the first thing I said is,
10 who's hurt --

11 Q. Right.

12 A. -- because of the squad.

13 Q. Right.

14 A. And when they began describing injuries
15 and the fact that he had been tased, I look at
16 him and I see that he's naked. I see that he's
17 wet. I've got three young, strong police
18 officers who had to struggle mightily with this
19 guy. He's naked from the waist down. There's
20 water everywhere. And they had to tase him, and
21 that didn't have effect.

22 So that's what had me thinking excited
23 delirium.

24 Q. And, I guess, were you able to sort of
25 survey the whole scene when you were in that

1 patio and take all of those things in as they
2 were -- as they were giving you all this
3 information?

4 A. Right. I arrived to a controlled
5 scene.

6 When I got there, Mr. Roell was not --
7 was not mobile at all. He was lying still.

8 And I was able to take a look around
9 the patio and see the destruction, see the
10 injuries, have them give me a very quick
11 description of what happened, and then make a
12 determination that this could be an excited
13 delirium case.

14 Q. And at that point, did you know the
15 EMTs were responding?

16 A. Yes. I knew the EMTs were responding
17 before I even got at the scene, because they had
18 already been called for twice.

19 Q. You had some conversation with -- well,
20 you indicated in response to one of Ms. Martin's
21 questions that you -- there was a name that came
22 out over the radio, but it ended up not being the
23 correct name; is that correct?

24 A. Yes.

25 Q. And do you recall what name came out

1 over the radio?

2 A. I didn't have a recollection, but I saw
3 it on here on the CAD printout.

4 Q. You say on here, you're looking at
5 Exhibit 17?

6 A. Exhibit 17, yes.
7 I knew it was -- it was a name that
8 ended up being not the right name.

9 They said Gary Royal.

10 Q. And when you heard that name, did
11 you -- did you recognize that name?

12 A. No.

13 Q. And you were responding to
14 10929 Barrington Court, correct?

15 A. That was the dispatch address, yes.

16 Q. When you got to the scene of 10929 and
17 10927 Barrington Court, did that scene look
18 familiar to you? Had you been there before?

19 A. No. And even -- those apartment
20 complexes all look extremely similar. So even if
21 I had been there several times, it would be hard
22 to make it out.

23 Q. When you say all those complexes, do
24 you mean Barrington Court complexes or do you
25 mean complexes that look like Barrington Court?

1 What do you mean? --

2 A. On Hetz Drive there's several different
3 streets, Barrington Court is one of them. And
4 there's apartment complexes or apartments back
5 there. And they all look very, very similar, the
6 condos, apartments, yeah.

7 Q. -- I mean, are they -- I've never been
8 back there. Are they similar to -- like do they
9 look like they were built by the same builder?

10 A. Yes.

11 Q. Oh, okay.

12 A. The only reason that the name stood out
13 to me on dispatch was because it told us the
14 suspect was known to the victim.

15 Q. And the fact that the victim and the
16 suspect know each other, is that of significance
17 to the law enforcement officer?

18 A. It can be. You've got someone that
19 knows the victim, breaking out their window.

20 So we don't know if this is a domestic
21 situation or a maybe a neighbor trouble that's
22 gone wrong. You're not sure what's going on.

23 All you know is that someone who is
24 known to the victim is breaking out their window.
25 And the victim is concerned enough that they're

1 calling 911.

2 Q. If I can have you look at Exhibit 24,
3 which is the missing persons report. And it may
4 not be in there yet.

5 Do I put it in there? Yeah. There it
6 is.

7 You indicated to Ms. Martin you don't
8 independently recall this incident.

9 A. That's right.

10 Q. But is it -- is it fair to assume that,
11 because this was a missing persons report, that
12 you never came into contact -- contact with
13 Mr. Roell in this report or its aftermath?

14 A. It's possible because --

15 Q. What's possible?

16 A. It's possible I did not ever meet him.

17 I have the cancellation here. And it
18 says that on 10/20/09 the victim returned home in
19 good health and is being treated for his mental
20 issues and I cancelled the missing.

21 So that could very well mean that
22 Mrs. Roell called me and told me that he was
23 back, and so I cancelled it.

24 I don't have to physically see him in
25 order to cancel it.

1 Q. Okay. And what about in order to take
2 the report, do you physically have to see
3 Mrs. Roell to take the report at all, or can that
4 report be taken over the telephone?

5 A. Oh, I would have to see her. We don't
6 do reports over the phone.

7 Q. And she could have came -- and she
8 could have come in to see you or you could have
9 responded to her, you don't recall?

10 A. That's correct. I have no idea.

11 Q. So you don't recall how concerned
12 Mrs. Roell was at the time about her husband?

13 A. No, I don't.

14 Q. And the lady sitting to
15 Mr. Gerhardstein's right, the lady right here,
16 that's Mrs. Roell.

17 Do you recognize Mrs. Roell today?

18 A. I don't, no. Sorry. I meet a lot of
19 people.

20 Q. Let's look at Exhibit 25, which is your
21 after-action report.

22 Are these -- are these after-action
23 reports, are they done routinely?

24 A. No. They're done on critical
25 incidents.

1 Q. And who determines that -- that one is
2 going to be done?

3 A. Usually a lieutenant, one of the
4 lieutenants will determine if an after-action
5 should be done.

6 Q. Did a lieutenant determine that this
7 should be done?

8 A. I believe it was Lieutenant Daugherty
9 who told me to do this one.

10 Q. But you're not certain?

11 A. I am not certain, no.

12 I didn't just decide to do it on my
13 own, though. I get instructed to do them.

14 Q. Okay. In your after-action report and
15 in your analysis of this incident, did you have
16 any criticisms of the tasings that were deployed
17 in this incident with Mr. Roell?

18 A. No, no criticism at all.

19 I thought that the officers did a good
20 job of moving up and down the use of force
21 spectrum as they were dealing with the struggle
22 of the subject.

23 You know, when Mr. Roell first
24 approached them and they tried the power display,
25 that didn't work.

1 But, you know, he started to back down,
2 they thought, so they put the Taser away and went
3 hands-on. That didn't work.

4 So they used the Taser until that
5 didn't work, and then went back to hands.

6 I thought they did an excellent job
7 of -- of using the tools that they had and the
8 minimal force necessary to get him into custody.

9 Q. And was it your understanding that when
10 the deputies in this case went hands-on, that
11 they did not use hard hands techniques, that they
12 maintained subject control techniques?

13 A. It's my understanding that there was
14 not any punches or kicks thrown by the
15 deputies.

16 Q. And was it your understanding that they
17 chose -- the levels of force they chose, even in
18 the context of your understanding of Mr. Roell
19 striking them -- striking the deputies?

20 A. Right. And you really don't choose the
21 level of force. The level of force is chosen for
22 you by the person resisting.

23 And I thought that they did an
24 excellent job in responding to the force that was
25 being used against them with the proper amount of

1 force.

2 Q. Did you, in your after-action report or
3 in your analysis of this incident, have any
4 criticisms of the subject control techniques that
5 the officers used, to the extent you're aware of
6 what they did?

7 A. No, no. I thought that they did
8 everything well. And once he was in control, was
9 right when I showed up, and that's when we moved
10 him into a recovery position.

11 Q. And in your after-action report or in
12 your analysis of this incident, were you critical
13 of any decisions that Deputies Huddleston,
14 Alexander, and/or Dalid made in terms of their
15 assessment of the threat, their judgment about
16 what was appropriate, and then the response to
17 it?

18 A. No. They responded to a woman calling
19 for help that someone was breaking out windows to
20 her house. And then they were confronted by
21 someone violently attacking and resisting.

22 They didn't have any options but to do
23 with they did.

24 Q. In your critique, if I could call your
25 attention to the last page, which I think is

1 Bates 2013.

2 A. Uh-huh.

3 Q. You said, It was determined that there
4 had been prior runs to this address range.

5 Where did you get that information?

6 A. I did not get the information. Someone
7 else had gotten the information. And I'm not
8 sure where it was -- I can't tell you right now
9 where I learned it. But I know that I was told
10 by someone else there had been prior runs there.

11 Q. What address range was used to make
12 this determination that prior runs had been made,
13 do you know?

14 A. Mr. Roell's address.

15 Q. So when you said address range, I
16 got -- I got a little confused.

17 When you said range --

18 A. It should have just said address.

19 Q. Oh, so there are two addresses involved
20 in the legend: 10929 Barrington and 10927,
21 Roell's residence, right?

22 A. Uh-huh.

23 Q. So when you said address range, did you
24 mean Mr. Roell's address, 10927?

25 A. Right. Because that's the information

<http://www.yclaw.net/help>

1 I had gotten was that there had been prior runs
2 to Mr. Roell's address, apparently through
3 probate and things like that.

4 So I should have -- I should have left
5 the word range off of there.

6 Q. Oh, yeah. This information was not
7 made available to the officers at the time of the
8 dispatch; that's correct, right?

9 A. That's correct.

10 Q. And what address were the officers
11 dispatched to?

12 A. Well, they were dispatched to the
13 victim's address, which was the 10929.

14 Q. And when you do a premises history, do
15 you know, is that dependant upon the address?

16 A. It is dependant upon the address, yes.

17 Q. So if -- let's just say Mrs. Roell had
18 called from 10927 and said that her husband was
19 out of control and she needed some help, and
20 someone ran a premises history, then they -- they
21 would have gotten potential -- a premises history
22 of prior runs to 10927 Barrington?

23 A. They may -- they may have, either the
24 officer in the car or the dispatcher has much
25 more success doing that.

1 Q. And in order to run a premises
2 history in this incident, let's say the
3 dispatcher did it, the dispatcher would have to
4 know that Mr. Roell was the person involved and
5 that Mr. Roell's actual address was
6 10927 Barrington?

7 A. That's right.

8 Q. And they would have to know that
9 10927 Barrington was -- I guess they didn't have
10 to know.

11 I was thinking they would have to know
12 that the two addresses were in close proximity,
13 but maybe not.

14 Without the information that it was
15 Mr. Roell and that his address was 10927, there
16 would not be a premises history that would be
17 helpful in this incident.

18 Is that -- am I right?

19 A. Yes. That would be correct. Because
20 the person whose windows were being broken called
21 from her house. So that was the dispatch
22 address, not Mr. Roell's.

23 Q. And you say, While unlikely this
24 information would have changed the outcome.

25 Now -- now I'm a little -- now that we

1 cleared up the address range part I'm a little
2 confused.

3 Can you tell me what it was that
4 caused you to conclude that a premises history
5 to Mr. Roell's address, even if it had
6 revealed prior runs for psychological problems,
7 would not have changed the outcome in this
8 particular case?

9 A. Because even if we had known going in
10 that this was someone that had a history of
11 psychological issues, we still have to respond to
12 the threat at hand today, right now.

13 And the threat and the problem that
14 night was Mr. Roell breaking out windows, acting
15 violent, and confronting our deputies with
16 violence.

17 So even knowing everything, we can't
18 wait for him to get into this house that he's
19 breaking the window out and potentially harm
20 someone there or further harm himself by breaking
21 glass.

22 We don't have the luxury of waiting.
23 We have got to take action right now to stop
24 someone who is acting violent.

25 Q. So this critique, When the

1 information's available, we should work with
2 Hamilton County Communications to make sure that
3 CAD has the information needed to assist officers
4 and dispatchers.

5 What -- do you have any idea what, I
6 guess, the action plan might be to implement
7 your -- your suggestion that --

8 A. Yeah. I've actually talked to some of
9 the court service supervisors about that, and
10 trying to get them to put information into the
11 CAD, get with the communication center when
12 they're on their probate runs and stuff like
13 that.

14 Because that's not always in the radio
15 and it's not always in dispatch.

16 Q. So with some of the court services
17 folks that might make a probate pink slip run, to
18 enter that into the CAD system for that -- for
19 that premises history?

20 A. Right. To have our dispatch have that
21 information, that would be helpful.

22 And like I said, in this instance,
23 I don't think it would have made any
24 difference.

25 But in other instances -- you know,

1 maybe if we get there and right away Mr. Roell
2 stops being violent, then maybe the officers,
3 knowing this information, determine that it's a
4 health issue and not an arrest issue. That's
5 good information to have.

6 Because there -- you know, we didn't
7 have any other way of getting information about
8 Mr. Roell. There was no one else to get any
9 information from.

10 Q. And -- so am I understanding your
11 testimony correctly that it's your understanding
12 that some of this information on someone's
13 psychological well-being or a call to a
14 particular address that sometimes that makes it
15 into CAD or doesn't make it into CAD, or what's
16 your experience with that?

17 A. Sometimes it can, sometimes it doesn't.
18 It all depends if it goes over the main dispatch
19 channel then they create a detail for it. You
20 can be what's called code 6, which is an
21 investigation. That's not a detail.

22 And if the communication center puts
23 you out code 6 to a location and they don't
24 create a detail for it, it wouldn't go into the
25 premises history.

1 So the only way that the dispatch would
2 have a premises history is if they created a
3 detail for it.

4 Q. If dispatch created --

5 A. If dispatch created a detail for it,
6 yes.

7 Q. The Hamilton County Communication
8 Center, is it -- is it run by the sheriff?

9 A. No.

10 Q. You discussed positional asphyxiation
11 with Ms. Martin. And I thought I understood you
12 to say -- and I want you to correct me if I'm
13 wrong -- that when attempting to prevent the
14 possibility of positional asphyxiation, that
15 having someone on their side or having them
16 sitting up, would be two positions that would,
17 from your perspective as a law enforcement
18 officer, help to prevent the susceptibility of
19 asphyxiation --

20 A. That's correct.

21 Q. -- in that position, right?

22 A. Yes.

23 Q. And I thought what you indicated you're
24 trying to avoid is the inability of the diaphragm
25 to expand and contract; is that right?

1 A. That's correct.

2 MS. SEARS: Can I just have a second?

3 THE VIDEOGRAPHER: We're off the
4 record.

5 (Off the record.)

6 THE VIDEOGRAPHER: We're on the record.

7 MS. SEARS: Nothing further.

8 FURTHER EXAMINATION

9 BY MS. MARTIN:

10 Q. In responding to your attorney's
11 questioning, you said that you showed up onto the
12 scene as soon as Mr. Roell was under control?

13 A. Well, when I showed up to the scene he
14 was under control.

15 Q. So you don't know how long he had been
16 under control before you arrived at the scene,
17 correct?

18 A. Not -- I don't have personal knowledge,
19 no. I just go off of what the officer directives
20 before me said.

21 Q. You said that you were trying to get
22 information about prior runs to someone's
23 residence into the CAD system, right?

24 A. No. I said we had discussed ways to
25 get that done.

1 Q. When did you discuss that?

2 A. I don't know the date. It's -- it was
3 all part of -- we were talking about things that
4 would -- could have been better in this
5 instance.

6 Q. Had you talked with anyone about
7 doing -- making that improvement in your system
8 before August 13th, 2013?

9 A. Well, we've talked about making a lot
10 of improvements to our communication center and
11 our CAD system many, many times.

12 There's -- there's things that --
13 that we like that we wish we had and don't have
14 and so there's constant talk about ways to
15 improve it.

16 Q. Is this specific critique about not
17 having information about prior runs to a
18 residence one that you had prior to
19 August 13th, 2013?

20 A. Yes. It's common not to have enough
21 information, whether -- whether because you don't
22 have an address history or the caller doesn't
23 give correct information.

24 MS. MARTIN: Nothing further.

25 MS. SEARS: Nothing.

1 THE REPORTER: Signature?

2 THE SEARS: Signature, yeah.

3 THE VIDEOGRAPHER: We're off the
4 record.

5

6



SERGEANT MIKAL STEERS

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DEPOSITION ADJOURNED AT 1:56 P.M. _____

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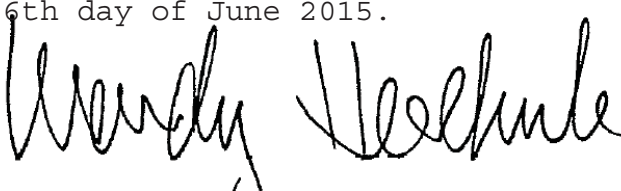
3 STATE OF OHIO :
4 : SS
5 COUNTY OF HAMILTON :

6 I, Wendy Haehnle, the undersigned, a
7 duly qualified and commissioned notary public
8 within and for the State of Ohio, do certify that
9 before the giving of his deposition, SERGEANT
10 MIKAL STEERS was by me first duly sworn to depose
11 the truth, the whole truth and nothing but the
12 truth; that the foregoing is the deposition given
13 at said time and place by SERGEANT MIKAL STEERS;
14 that I am neither a relative of nor employee of
15 any of the parties or their counsel, and have no
16 interest whatever in the result of the action.

17 IN WITNESS WHEREOF, I hereunto set my hand
18 and official seal of office at Cincinnati, Ohio,
19 this 26th day of June 2015.

20

21

22 
Wendy Haehnle
Notary Public - State of Ohio
My commission expires September 3, 2017

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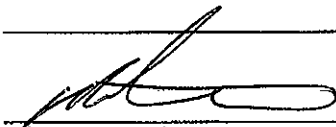
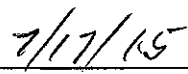
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1 ERRATA SHEET

2 DEPOSITION OF: SERGEANT MIKAL STEERS
3 TAKEN: JUNE 17, 2015

4 Please make the following corrections to my
5 deposition transcript:

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